## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 150309**

FILED Apr 18, 2005 Secretary of State

Entity Name: BLASER'S NURSERIES, INC.

Current P	rincipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
1315 QUAI SARASOT	IL DR A, FL 34231	US			
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
1315 QUAI SARASOT	IL DRIVE A, FL 34231	US			
FEI Number:	: 59-0573472	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
BLASER, C 1315 QUAI SARASOT		US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUF	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () BLASER, PATR 1315 QUAIL DR SARASOTA, FL	<b>.</b> .	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () JOHNSON, ROI 27 SOUTH ORA SARASOTA, FL	NGE AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ST () BLASER, JOHN 1315 QUAIL DE SARASOTA, FL	IVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: P. C. BLASER PD 04/18/2005