2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 271057

Entity Name: REINTS BROTHERS NURSERY, INC.

Apr 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

511 ELGIN ST. SEBRING, FL 33875

Current Mailing Address: New Mailing Address:

511 ELGIN ST. SEBRING, FL 33875

FEI Number: 59-1010235 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:

REINTS, GREG D REINTS, GREG D 511 ELGIN ST. 511 ELGIN ST. US US

SEBRING, FL 33872 SEBRING, FL 33875

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GREG D REINTS 04/17/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: REINTS, GREG D REINTS, GREG D Name: Name:

511 ELGIN ST. 511 ELGIN ST. Address: Address: SEBRING, FL 33875 City-St-Zip: SEBRING, FL 33872 City-St-Zip:

Title: Title: AS () Delete AS (X) Change () Addition

Name: REINTS, ERIC E Name: REINTS, ERIC E 27094 PACIFIC TERRACE DR. 3899 RUNNING DEER DR. Address: Address: MISSION VIEJO, CA 92692 CASTLE ROCK, CO 80109 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition

REINTS, JOHN S JR. REINTS, JOHN S JR. Name: Name: 137 MASTERS AVE 36246 GOLDEN GATE DR. Address: Address: City-St-Zip: RIVERSIDE, CA 92507 City-St-Zip: YUCAIPA, CA 92399

Title: VΡ () Delete Title: () Change () Addition

REINTS, EDWARD D Name: Address: 1520 S ROCHELLE DRIVE Address: City-St-Zip: WINTER HAVEN, FL 338819645 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Ρ SIGNATURE: GREG D REINTS 04/17/2009