2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 346687

Entity Name: WEBB'S NURSERY, INC.

FILED Jan 27, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2251 MONTCLAIR RD CLEARWATER, FL 34623

Current Mailing Address: New Mailing Address:

2251 MONTCLAIR RD CLEARWATER, FL 34623

FEI Number: 59-1261304 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:

WEBB. JAMES L. 2251 MONTCLAIR RD. CLEARWATER, FL 34623

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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WEBB, JAMES L.,
 Name:
 WEBB, JAMES L.,

 Address:
 2251 MONTCLAIR ROAD
 Address:
 2251 MONTCLAIR ROAD

2251 MONTCLAIR ROAD
CLEARWATER, FL
Address: 2251 MONTCLAIR ROAD
City-St-Zip: CLEARWATER, FL 33763

Title: VP () Delete Title: VP (X) Change () Addition Name: WEBB. DAVID B.. VP (X) Change () Addition Name: WEBB. DAVID B..

Name:WEBB, DAVID B.,Name:WEBB, DAVID B.,Address:2251 MONTCLAIR ROADAddress:2251 MONTCLAIR ROADCity-St-Zip:CLEARWATER, FLCity-St-Zip:CLEARWATER, FL33763

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

Name:WEBB, JOHN D.,Name:WEBB, JOHN D.,Address:2251 MONTCLAIR ROADAddress:2251 MONTCLAIR ROADCity-St-Zip:CLEARWATER, FLCity-St-Zip:CLEARWATER, FL33763

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: DAVID BUFORD WEBB VP 01/27/2004