FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

95 MAY 21 PM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 521460 (6)

1. Corporation Name
Lukas Nursery + Garden Shop, Inc

Principal Place of Business
1909 Slavia Rd
Oviedo FL 32765

Mailing Address
1909 Slavia Rd
Oviedo FL 32765

DO NOT WRITE IN THIS SPACE

3. Date Incorporation or Qualified: 12/30/1976
3a. Date of Last Report: 2/24/94

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-1707563 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
Lukas, Philip N.
1929 Slavia Rd
Oviedo FL 32765

10. Name and Address of New Registered Agent
91 Name
92 Street Address (P.O. Box Number is Not Acceptable)
93
94 City — FL — 95 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when filed by mail. Date: 3/15/95

12. OFFICERS AND DIRECTORS

TITLE	
NAME	
STREET ADDRESS	
CITY · ST · ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY · ST · ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY · ST · ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY · ST · ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/T/D	☒ Change ☐ Addition
1.2 NAME	Lukas, Philip N.	
1.3 STREET ADDRESS	1929 Slavia Rd	
1.4 CITY · ST · ZIP	Oviedo FL 32765	
2.1 TITLE	V/D	☒ Change ☐ Addition
2.2 NAME	Lukas, Paul M	
2.3 STREET ADDRESS	4137 Plymouth-Sorrento Rd	
2.4 CITY · ST · ZIP	Apopka FL 32712-5412	
3.1 TITLE	S/D	☒ Change ☐ Addition
3.2 NAME	Lukas, Jonathan S.	
3.3 STREET ADDRESS	2340 Pine St.	
3.4 CITY · ST · ZIP	Oviedo FL 32765	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	Lukas, Gertrude G	
4.3 STREET ADDRESS	2411 Church St	
4.4 CITY · ST · ZIP	Oviedo FL 32765	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY · ST · ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY · ST · ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the trustee or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 3/15/95 — Daytime Phone: 407-366-5042