FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 2:14

DOCUMENT # **678348** **(4)**

1. Corporate Name
CHARLES GREEN'S NURSERY OF FLORIDA, INC.

Principal Place of Business
6284 W. BOYNTON BEACH BLVD
P.O. BOX 3645
BOYNTON BCH FL 33424-0645

Mailing Address
6284 W. BOYNTON BEACH BLVD
P.O. BOX 3645
BOYNTON BCH FL 33424-0645

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (or Qualified): 07/14/1980
3a. Date Annual Report: 08/17/1994

2. Date of Last Amendment
21
Date Adopted
22
U.S. Code
23
24 25

2a. Mailing Address
26
Date Adopted
27
U.S. Code
28
29 30

4. FEI Number: 59-2018577
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Is this a Campaign Finance Trust Fund Corporation ☐ **$5.00** May Be Added to Fees

8. Has corporation been liable for attorney's fees under 607.0850 Florida Statutes? ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LEGUM, E. WAYNE
17170 WHITEHAVEN DR
BOCA RATON FL 33496

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.0505 Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation's board of directors hereby accept the appointment as registered agent. Our principal place of business is the same as the registered office.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS, DIRECTORS, AND CHANGES
TITLE	DVS	☐ Change ☐ Add/Del
NAME	WOODALL, CHARLES B., JR.	
STREET ADDRESS	311 BUCKHEAD AVE. N.E	
CITY, ST, ZIP	ATLANTA GA	
TITLE	D	☐ Change ☐ Add/Del
NAME	WOODALL, JOAN D.	
STREET ADDRESS	311 BUCKHEAD AVE. N.E	
CITY, ST, ZIP	ATLANTA GA	
TITLE	DP	☐ Change ☐ Add/Del
NAME	LEGUM, E. WAYNE	
STREET ADDRESS	17170 WHITEHAVEN DR	
CITY, ST, ZIP	BOCA RATON FL	
TITLE		☐ Change ☐ Add/Del
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Add/Del
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Add/Del
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

REMITTED BY MAY 1

14. I, E. Legum, certify that the information supplied with this report is substantially accurate and does not deviate from the information stated in Section 607.0501(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and complete 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 receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on attached additional sheets.

SIGNATURE: X E. Wayne Legum 4/28/95 407 737-2770
SIGNATURE AND TYPED OR PRINTED NAME OF PRESIDING OFFICER OR DIRECTOR

0436893 FP