

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002086

FILED
Apr 11, 2005
Secretary of State

Entity Name: JOLLY GARDENER PRODUCTS, INC.

Current Principal Place of Business:

800 EXECUTIVE DRIVE
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

P O BOX 622348
OVIEDO, FL 327622348 US

New Mailing Address:

FEI Number: 52-2077305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: MORRISON, RICHARD M
Address: 481 SPRINGWATER ROAD
City-St-Zip: POLAND SPRING, ME 04274

Title: VSD () Delete
Name: MALONE, STEPHEN I
Address: 481 SPRINGWATER ROAD
City-St-Zip: POLAND SPRING, ME 04274

Title: VTCF () Delete
Name: WILENS, STUART
Address: 800 EXECUTIVE DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: MAHONEY, BRIAN T
Address: 111 S CALVERT ST #1800
City-St-Zip: BALTIMORE, MD 21202

Title: D () Delete
Name: HALL, JOSHUA M.D.
Address: 111 S CALVERT ST #1800
City-St-Zip: BALTIMORE, MD 21202

Title: D () Delete
Name: MCKERNAN, JOHN R JR.
Address: ONE CANAL PLAZA
City-St-Zip: PORTLAND, ME 04112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KNIGHT, DWIGHT
Address: 351 HORSESHOE LANE
City-St-Zip: CROSS CITY, FL 32628

Title: T (X) Change () Addition
Name: GOLD, BOB
Address: 800 EXECUTIVE DR
City-St-Zip: OVIEDO, FL 32765

Title: S (X) Change () Addition
Name: BOOTH, MICHAEL
Address: 111 S CALVERT ST #1800
City-St-Zip: BALTIMORE, MD 21202

Title: VASD (X) Change () Addition
Name: MAHONEY, BRIAN T
Address: 111 S CALVERT ST #1800
City-St-Zip: BALTIMORE, MD 21202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT GOLD

T

04/11/2005

Electronic Signature of Signing Officer or Director

Date