2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# F06356

Entity Name: HAM'S NURSERY, INC.

Current Principal Place of Business:

P.O. BOX 185
RT 207 AT HELEN STREET
ST AUGUSTINE, FL 32085

New Principal Place of Business:

1333 HELEN STREET
ST AUGUSTINE, FL 32085

Current Mailing Address:

P.O. BOX 185
RT 207 AT HELEN STREET
ST AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-2045966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMILTON, JON DAVID
20 MENENDEZ ROAD
ST. AUGUSTINE, FL 32084 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: PTD ( ) Delete
Name: HAMILTON, JON DAVID
Address: 20 MENENDEZ RD
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VSD ( ) Delete
Name: APEL, DANIEL WILLIS JR.
Address: 3741 ARROWHEAD DR
City-St-Zip: SAINT AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: JON DAVID HAMILTON PTD 03/10/2009

Electronic Signature of Signing Officer or Director — Date