

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F33820

Entity Name: ELLENTON NURSERY, INC.

FILED
Jan 30, 2012
Secretary of State

Current Principal Place of Business:

BOX 416
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

BOX 416
PARRISH, FL 34219

New Mailing Address:

FEI Number: 59-2112101

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACE, CRAIG J
3203 97TH AVENUE EAST
PARRISH, FL 34219 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

OFFICERS AND DIRECTORS:

Title: DST
Name: TRACE, PRISILLA L
Address: 3203 97TH AVENUE EAST
City-St-Zip: PARRISH, FL 34219 US

Title: DP
Name: TRACE, CRAIG J
Address: 3203 97TH AVENUE EAST
City-St-Zip: PARRISH, FL 34219 US

I hereby 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 all other like empowered.

SIGNATURE: CRIAG J. TRACE

DP

01/30/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date