2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State
04-21-2004 90047 001 ***150.00

01132004 Chg-P CR2E034 (10/03)

DOCUMENT # F62501

1. Entity Name
BILL'S NURSERY, INC.

Principal Place of Business	Mailing Address
C/O STEVE GARRISON 1950 NW 10TH TERR HOMESTEAD, FL 33030 US	C/O STEVE GARRISON 1950 NW 10TH TERR HOMESTEAD, FL 33030 US

2. Principal Place of Business	3. Mailing Address
20625 S.W. 304 street	P.O. Box 900637
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Homestead, FL	City & State: Homestead, FL
Zip: 33030 Country: USA	Zip: 33090 Country: USA

4. FEI Number: 59-2168527 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GARRISON, STEPHEN T 1950 NW 10 TERRACE HOMESTEAD, FL 33030	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] STEVE GARRISON 13 JAN 04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GARRISON, STEPHEN T 1950 NW 10TH TERRACE HOMESTEAD, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 20625 S.W. 304 St. Homestead, FL 33030	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GARRISON, SUSAN D 1950 NW 10 TERRACE HOMESTEAD, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 20625 S.W. 304 St. Homestead, FL 33030	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS GARRISON DONOVAN S 1950 NW 10TH TERR HOMESTEAD, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 20625 S.W. 304 St. Homestead, FL 33030	☑ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] STEPHEN T. GARRISON 13 JAN 04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #