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FILED

Jan 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G75234

(6)

1. Corporation Name

GOLD LEAF NURSERY, INC.

Principal Place of Business

11275 ACME DAIRY RD  
P. O. BOX 3150  
BOYNTON BEACH FL 33424

Mailing Address

P.O. BOX 740727  
BOYNTON BEACH FL 33474

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1983

4. FEI Number

59-2361198

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

P.O. Box 740727

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

Boynton Beach, FL

23 Zip

Country

28 Zip

Country

24

25

29

33474

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOGAN, ANDREW S  
6601 N E 21 DR  
FT LAUDERDALE FL 33308

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 Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S  
NAME DEREUIL, LOU  
STREET ADDRESS 1040 BAYVIEW DR STE 424  
CITY-ST-ZIP FT. LAUDERDALE FL 33304

☐ DELETE

TITLE P  
NAME LOGAN, ANDREW S.  
STREET ADDRESS 6601 21ST DR.  
CITY-ST-ZIP FT. LAUDERDALE FL 33308

☐ DELETE

TITLE V  
NAME BARGAS, JOHN  
STREET ADDRESS 1401 N E 36TH COURT  
CITY-ST-ZIP FT. LAUDERDALE FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Andrew S. Logan*

1/19/98 (561) 736-6693

CR2E034 (10/97)