2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

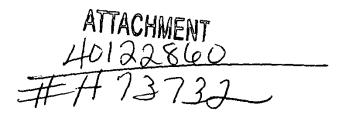
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SIGNATURE:

Secretary of State DOCUMENT # H73732 07-05-2007 90059 041 ***150.00 PETÉRSON NURSERY & GARDEN CENTER, INC. Principal Place of Business Mailing Address 2184E COUNTY RD 540A HUINMAA. 2184E COUNTY RD 540A LAKELAND, FL 33813 LAKELAND, FL 33813 US 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 07032007 CR2E034 (12/06) Applied For City & State City & State 4. FEI Number 59-2578060 Not Applicable 7in Country \$8.75 Additional Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Howell PETERSON, HOWELL E. Street Address (P.O. Box Number is Not Ac 2185 HWY 540A Dlease LAKELAND, FL 33803 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 PROSIDOND Signature, typed or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) 9. Efection Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Change Addition TITLE ☐ Delete TITLE PETERSON, HOWELL E., JR. NAME NAME STREET ADDRESS 1627 ATHENS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL CITY-ST-ZIP \$T ☐ Change TITLE ☐ Delete TITLE ■ Addition NORRIS, KAREN C. NAME NAME STREET ADDRESS 3412 SOUTH CREST BLVD STREET ADDRESS CITY-ST-ZIP LAKELAND, FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

FILED

Jul 05, 2007 8:00 am



GROWING

Nursery & Garden Center, Inc.

Thank you for your help on line into



2184 E. County Road 540 A Lakeland, Fl., 33813 (863) 644-6491



E-Mail: petersonnursery @ Juno.Com.