

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H78111

FILED  
Jul 01, 2006  
Secretary of State

Entity Name: NURSERYMEN'S SURE-GRO CORP.

## Current Principal Place of Business:

4390 N. US HIGHWAY 1  
VERO BEACH, FL 32967

## New Principal Place of Business:

4390 N. U.S. HIGHWAY 1  
VERO BEACH, FL 32967

## Current Mailing Address:

4390 N. US HIGHWAY 1  
VERO BEACH, FL 32967

## New Mailing Address:

4390 N. U.S. HIGHWAY 1  
VERO BEACH, FL 32967

FEI Number: 59-2584289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALKER, LAWRENCE  
4390 NORTH US HIGHWAY 1  
VERO BEACH, FL 32967 US

## Name and Address of New Registered Agent:

WALKER, LAWRENCE  
4390 NORTH U.S. HIGHWAY 1  
VERO BEACH, FL 32967 US

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: LAWRENCE WALKER

07/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: WALKER, LAWRENCE R.,  
Address: 4390 N. US 1  
City-St-Zip: VERO BEACH, FL

Title: DVS ( ) Delete  
Name: WALKER, VIRGINIA H.,  
Address: 4390 N. US 1  
City-St-Zip: VERO BEACH, FL

## 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 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: VIRGINIA H WALKER

VP

07/01/2006

Electronic Signature of Signing Officer or Director

Date