

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93497

Entity Name: DELOACH NURSERY, INC.

FILED
Apr 23, 2011
Secretary of State

Current Principal Place of Business:

C/O CARROLL E DELOACH
142 NORTH RIFLE RANGE ROAD
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

142 NORTH RIFLE RANGE RD
WINTER HAVEN, FL 33880 US

Current Mailing Address:

C/O CARROLL E DELOACH
142 NORTH RIFLE RANGE ROAD
WINTER HAVEN, FL 33880 US

New Mailing Address:

142 NORTH RIFLE RANGE RD
WINTER HAVEN, FL 33880 US

FEI Number: 59-2627724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELOACH, CARROLL
142 NORTH RIFLE RANGE ROAD
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

WILLIAM P WHITING
142 NORTH RIFLE RANGE ROAD
WINTER HAVEN, FL 33880 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: WILLIAM P WHITING

04/23/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WHITING, WILLIAM P
Address: 361 VAIL DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: S
Name: DELOACH, CARROLL E
Address: 142 N RIFLE RANGE ROAD
City-St-Zip: WINTER HAVEN, FL

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: WILLIAM P WHITING

P

04/23/2011

Electronic Signature of Signing Officer or Director

Date