


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # K05329	
1. Entity Name C. J.'S NURSERY OF PINELLAS COUNTY, INC.	

Principal Place of Business C/O CHRIS J. SWEZEY 10234 SHADY DR. HUDSON, FL 34669	Mailing Address C/O CHRIS J. SWEZEY 10234 SHADY DR. HUDSON, FL 34669
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04212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2862270	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SWEZEY, CHRIS J.
10234 SHADY DR.
HUDSON, FL 34669

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SWEZEY, CHRIS J. 10234 SHADY DR. HUDSON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SWEZEY, TINA M. 10234 SHADY DR. HUDSON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/25/05-80093-021 150.00

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: Chris J. Swezey **CHRIS J. SWEZEY** PRES. 4/22/05 777 856-8383
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #