2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2009
Secretary of State

DOCUMENT# K14373

Entity Name: GATOR GROWN FOLIAGE, INC.

Current Principal Place of Business:

20925 S.W. 187TH AVE
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

20925 S.W. 187TH AVE
MIAMI, FL 33187

New Mailing Address:

10857 S RUNNING DEER POINT
INVERNESS, FL 34452

FEI Number: 65-0029050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WADE, PATRICIA L
20925 SW 187 AVE
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

WADE, PATRICIA L
10857 S RUNNING DEER POINT
INVERNESS, FL 34452 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: _____ 05/15/2009
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: PS ( ) Delete
Name: WADE, PATRICIA L PHD
Address: 20925 SW 187 AVE
City-St-Zip: MIAMI, FL 33187

Title: VT ( ) Delete
Name: CURRY, DARRELL W
Address: 21140 SW 179TH AVE
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: WADE, PATRICIA L PHD
Address: 10857 S RUNNING DEER POINT
City-St-Zip: INVERNESS, FL 34452

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA WADE PS 05/15/2009
Electronic Signature of Signing Officer or Director — Date