

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K14756

FILED  
Feb 16, 2012  
Secretary of State

**Entity Name:** MCMULLEN WHOLESale NURSERY, INC.

**Current Principal Place of Business:**

8028 COSME ROAD  
ODESSA, FL 33556 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 896  
ODESSA, FL 335560896 US

**New Mailing Address:**

FEI Number: 59-2880359

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCMULLEN, JR., JOHN L  
3623 W. BARCELONA STREET  
TAMPA, FL 33629 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCMULLEN, JR., JOHN L  
Address: 3623 BARCELONA ST  
City-St-Zip: TAMPA, FL 33629

Title: SEC  
Name: MCMULLEN, JUDITH F  
Address: 3623 BARCELONA ST  
City-St-Zip: TAMPA, FL 33629

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: JUDITH F. MCMULLEN

SEC

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date