

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K22951

FILED
Feb 23, 2004
Secretary of State

Entity Name: WESTER CITRUS CARETAKING AND NURSERY, INC.

Current Principal Place of Business:

22500 OKEECHOBEE RD
FT. PIERCE, FL 34945 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12129
FT PIERCE, FL 34979 US

New Mailing Address:

FEI Number: 65-0065390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTER, JERRY WAYNE
1590 COPENHAVER RD
FT PIERCE, FL 34945

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WESTER, JERRY WAYNE,
Address: 1590 COPENHAVER RD
City-St-Zip: FT PIERCE, FL

Title: DVP () Delete
Name: WESTER, MICHAEL,
Address: 3530 4TH PLACE, S.W.
City-St-Zip: VERO BEACH, FL

Title: DS () Delete
Name: WESTER, MARK,
Address: 7905 LAKELAND BOULEVARD
City-St-Zip: FORT PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change () Addition
Name: WESTER, MARK,
Address: 540 45TH COURT SW
City-St-Zip: VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK W. WESTER

MR.

02/23/2004

Electronic Signature of Signing Officer or Director

Date