

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K32378

FILED
Jul 01, 2005
Secretary of State

Entity Name: NORTH AMERICAN HORTICULTURAL MANAGEMENT AND CONSULTING, INC.

Current Principal Place of Business:

6899 WINCHESTER CIRCLE
SUITE 102
BOULDER, CO 80301 US

New Principal Place of Business:

Current Mailing Address:

6899 WINCHESTER CIRCLE
SUITE 102
BOULDER, CO 80301 US

New Mailing Address:

FEI Number: 59-2461407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUR, THOMAS
100 N. BISCAYNE BLVD.
SUITE 2200
MIAMI, FL 33132 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

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: TD () Delete
Name: UNKELBACH, MICHAEL
Address: SCHUSTRASSE 2
City-St-Zip: 400 DUESSELDORF, GE

Title: VP () Delete
Name: TRELLINGER, KARL
Address: 6899 WINCHESTER CIRCLE
City-St-Zip: BOULDER, CO 80301

Title: S () Delete
Name: BAUR, THOMAS,
Address: 100 N. BISCAYNE BLVD.
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: FALKENSTEIN, GARY
Address: 6899 WINCHESTER CIRCLE STE 102
City-St-Zip: BOULDER, CO 80301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: GARY FALKENSTEIN

P

07/01/2005

Electronic Signature of Signing Officer or Director

Date