

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K47525

FILED
Feb 24, 2006
Secretary of State

Entity Name: MCCRORY'S SUNNY HILL NURSERY, INC.

Current Principal Place of Business:

% WARD E. MCCRORY
35152 LAPLACE COURT
EUSTIS, FL 32736 US

New Principal Place of Business:

Current Mailing Address:

% WARD E. MCCRORY
35152 LAPLACE COURT
EUSTIS, FL 32736 US

New Mailing Address:

35152 LAPLACE CT
EUSTIS, FL 32736 US

FEI Number: 59-2913143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRORY, DOLORES
35152 LAPLACE COURT
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

MCCRORY, DOLORES
35152 LAPLACE CT
EUSTIS, FL 32736 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: _____

Electronic Signature of Registered Agent

02/24/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCRORY, WARD E.,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL

Title: VD () Delete
Name: MCCRORY, DOLORES,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL

Title: STD () Delete
Name: GEORGIA ORSER,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL

Title: TRE () Delete
Name: ELIZABETH MCCRORY,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCRORY, WARD E.,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL 32736

Title: VD (X) Change () Addition
Name: MCCRORY, DOLORES,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL 32736

Title: STD (X) Change () Addition
Name: GEORGIA ORSER,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL 32736

Title: TRE (X) Change () Addition
Name: ELIZABETH MCCRORY,
Address: 35152 LAPLACE COURT
City-St-Zip: EUSTIS, FL 32736

I hereby certify that the information supplied with this filing does not qualify for the 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: DOLORES MCCRORY

Electronic Signature of Signing Officer or Director

VP

02/24/2006

Date