2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2011
Secretary of State

DOCUMENT# K71364

Entity Name: KATHY'S KORNER NURSERY, INC.

Current Principal Place of Business:

6095 HAINES RD. NORTH
ST. PETERSBURG, FL 33714 US

New Principal Place of Business:

Current Mailing Address:

6095 HAINES RD N
ST. PETERSBURG, FL 33714 US

New Mailing Address:

FEI Number: 65-0101718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUSE, KATHLEEN G
6095 HAINES ROAD N
SAINT PETERSBURG, FL 33714 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: P
Name: MUSE, KATHLEEN G.
Address: 3037-61ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: ST
Name: GILLAND, HAZEL M.
Address: 3037-61ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: VP
Name: MUSE, STEPHEN H
Address: 3037-61ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33714

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: KATHLEEN G. MUSE PRES 03/23/2011

Electronic Signature of Signing Officer or Director Date