2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K78755

Entity Name: MISS SUSAN'S NURSERY, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

209 NORTH FORSYTH STREET BUNNELL, FL 32110

Current Mailing Address: New Mailing Address:

P O BOX 1004 BUNNELL, FL 32110 US

FEI Number: 59-2942186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RICE, SUSAN H.
604 NORTH PEACH STREET
BUNNELL, FL 32010 US

RICE, SUSAN H.
698 NORTH PEACH STREET
BUNNELL, FL 32010 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: 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

 Name:
 RICE, SUSAN H,
 Name:
 RICE, SUSAN H,

 Address:
 209 N FORSYTH/PO BX 1004
 Address:
 209 N FORSYTH

 209 N FORSYTH/PO BX 1004
 Address:
 209 N FORSYTH/PO BX 1004

 BUNNELL, FL
 City-St-Zip:
 BUNNELL, FL 32110

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: SUSAN H RICE MRS 04/20/2005