2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0000001839

Entity Name: TROPICAL PARADISE WHOLESALE FOLIAGE, INC.

FILED Aug 03, 2009 Secretary of State

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

1062 BRANANFIELD RD MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

1062 BRANAN FIELD RD 1062 BRANANFIELD RD MIDDLEBURG, FL 32068 MIDDLEBURG, FL 32068

FEI Number: 59-3621954 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:

FULLER, GREGORY FULLER, GREGORY M
1062 BRANAN FIELD RD
MIDDLEBURG, FL 32068 US FULLER, GREGORY M
1062 BRANAN FIELD RD
MIDDLEBURG, FL 32068 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: GREGORY M FULLER 08/03/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: FULLER, GREGORY Name: FULLER, GREGORY M
Address: 135 ANDERSON DRIVE Address: 135 ANDERSON DRIVE

Address: 135 ANDERSON DRIVE Address: 135 ANDERSON DRIVE City-St-Zip: ROEBUCK, SC 29376 City-St-Zip: ROEBUCK, SC 29376

Title: VP () Delete Title: () Change () Addition

 Name:
 FULLER, CARLA M
 Name:

 Address:
 135 ANDERSON DRIVE
 Address:

 City-St-Zip:
 ROEBUCK, SC 29376
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GREGORY M FULLER PRES 08/03/2009