

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056897

FILED
Apr 26, 2004
Secretary of State

Entity Name: GREEN THUMB INTERIOR PLANT SERVICE, INC.

Current Principal Place of Business:

3382 TARRAGON ST
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

3382 TARRAGON ST
COCOA, FL 32926

New Mailing Address:

FEI Number: 59-3743357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, BONNIE F
3382 TARRAGON ST
COCOA, FL 32926

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUGHES, BONNIE F
Address: 6490 HOMESTEAD AVE
City-St-Zip: COCOA, FL 32927

Title: VP () Delete
Name: HUGHES, PAUL R
Address: 3382 TARRAGON ST
City-St-Zip: COCOA, FL 32926

Title: NA () Delete
Name: NA, NA
Address: NA
City-St-Zip: NA, NA NA

Title: NA () Delete
Name: NA, NA
Address: NA
City-St-Zip: NA, NA NA

Title: NA () Delete
Name: NA, NA
Address: NA
City-St-Zip: NA, NA NA

Title: NA () Delete
Name: NA, NA
Address: NA
City-St-Zip: NA, NA NA

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:

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: BONNIE HUGHES

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date