2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2011
Secretary of State

DOCUMENT# P01000112055

Entity Name: PURPLE MARTIN NURSERIES, INC.

Current Principal Place of Business:

1554 CRAWFORDVILLE HWY.
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

1554 CRAWFORDVILLE HWY.
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 59-3760302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, GLEN
1554 CRAWFORDVILLE HWY.
CRAWFORDVILLE, FL US

Name and Address of New Registered Agent:

CAMPBELL, GLEN
1554 CRAWFORDVILLE HWY.
CRAWFORDVILLE, FL 32327 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: _____ 03/18/2011
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: CAMPBELL, GLEN
Address: 1554 CRAWFORDVILLE HWY.
City-St-Zip: CRAWFORDVILLE, FL 32327

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: GLEN CAMPBELL P 03/18/2011
Electronic Signature of Signing Officer or Director — Date