2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P02000007575

Entity Name: ROMANELLO TROPICAL NURSERY, INC.

Current Principal Place of Business:

20710 SW 54TH PLACE
SOUTHWEST RANCHES, FL 33332

New Principal Place of Business:

Current Mailing Address:

20710 SW 54TH PLACE
SOUTHWEST RANCHES, FL 33332

New Mailing Address:

364 TAVISTOCK DRIVE
SAINT AUGUSTINE, FL 32095

FEI Number: 01-0588330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROMANELLO, KIMBERLY S
20710 SW 54TH PL
SOUTHWEST RANCHES, FL 33332 US

Name and Address of New Registered Agent:

ROMANELLO, KIMBERLY S
364 TAVISTOCK DRIVE
SAINT AUGUSTINE, FL 32095 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: _____ 04/30/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROMANELLO, FRANK N
Address: 20710 SW 54TH PL.
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: VD ( ) Delete
Name: ROMANELLO, KIMBERLY S
Address: 20710 SW 54TH PLACE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROMANELLO, FRANK N
Address: 364 TAVISTOCK DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: VD (X) Change ( ) Addition
Name: ROMANELLO, KIMBERLY S
Address: 364 TAVISTOCK DRIVE
City-St-Zip: SAINT AUGUSTINE, FL 32095

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: KIMBERLY ROMANELLO VD 04/30/2007
Electronic Signature of Signing Officer or Director — Date