

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 26, 2003 8:00 am**  
**Secretary of State**

03-26-2003 90184 017 \*\*\*150.00

**DOCUMENT # P02000011024**

1. Entity Name

**FIRST COAST HORTICULTURE, INC.**



Principal Place of Business

**1574 WINSTON LANE  
ORANGE PARK FL 32003**

Mailing Address

**1574 WINSTON LANE  
ORANGE PARK FL 32003**

2. Principal Place of Business

**1754 Pickwick PL**

3. Mailing Address

**1754 Pickwick PL**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Orange Park, FL**

City & State

**Orange Park, FL**

Zip

Country

**32003**

**U.S.**

Zip

Country

**32003**

**U.S.**

4. FEI Number

**61-1403102**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WILLIAMS, JOHN W  
1574 WINSTON LANE  
ORANGE PARK FL 32003**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **PTD WILLIAMS, JOHN W**  
STREET ADDRESS **1574 WINSTON LANE**  
CITY-ST-ZIP **ORANGE PARK FL 32003**

TITLE ☐ Delete  
NAME **VDS WETHERINGTON, ANDREW**  
STREET ADDRESS **1574 WINSTON LANE**  
CITY-ST-ZIP **ORANGE PARK FL 32003**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **1754 Pickwick PL**  
CITY-ST-ZIP **Orange Park, FL 32003**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
**John W. Williams**

**3/23/03**

**904-759-9012**

Date

Daytime Phone #

CR2E034 (10/02)