2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# P02000019076

Entity Name: SIX FLAGS NURSERY SUPPLIES, INC.

Current Principal Place of Business:

1600 N RONALD REAGAN BLVD
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

56325 WATER OAK RD
ASTOR, FL 32102

New Mailing Address:

1600 NORTH RONALD REAGAN BLVD.
LONGWOOD, FL 32750

FEI Number: 37-1419939 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANDERS, MARLO M
56325 WATER OAK RD
ASTOR, FL 32102 US

Name and Address of New Registered Agent:

SANDERS, MARLO M
1600 NORTH RONALD REAGAN BLVD.
LONGWOOD, FL 32750 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: 01/08/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: SANDERS, MARLO M
Address: 56325 WATER OAK RD
City-St-Zip: ASTOR, FL 32102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: SANDERS, MARLO M
Address: 1600 NORTH RONALD REAGAN BLVD.
City-St-Zip: LONGWOOD, FL 32750

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: MARLO SANDERS VP 01/08/2008
Electronic Signature of Signing Officer or Director — Date