

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118846

FILED
Mar 05, 2009
Secretary of State

Entity Name: TROPICAL TRAIL TREE FARM & NURSERY, INC.

Current Principal Place of Business:

2305 N. TROPICAL TRAIL
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

2305 N. TROPICAL TRAIL
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 05-0537947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, THADDEUS
2305 N. TROPICAL TRAIL
MERRITT ISLAND, FL 32953 US

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: WALLIS, PATRICIA E
Address: 423 LAURELWOOD CT
City-St-Zip: BLOOMINGTON, IN 47401

Title: S () Delete
Name: JOHNSON, THADEUS
Address: 2305 N. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JOHNSON, THADDEUS
Address: 2305 N. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32953

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: THAD C. JOHNSON

S

03/05/2009

Electronic Signature of Signing Officer or Director

Date