

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000146215

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** CENTRAL WETLANDS NURSERY, INC.

**Current Principal Place of Business:**

5582 HWY. 520  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

5582 HWY. 520  
COCOA, FL 32926

**New Mailing Address:**

**FEI Number:** 65-1211432

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KRSEK, RAYMOND  
5582 HWY. 520  
COCOA, FL 32926 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:** PRES  
**Name:** KRSEK, RAYMOND  
**Address:** 3230 ERICA RD.  
**City-St-Zip:** COCOA, FL 32926

**Title:** VP  
**Name:** WILKINSON, KATHY  
**Address:** 3230 ERIOA ST  
**City-St-Zip:** COCOA, FL 32926

**Title:** SGM  
**Name:** KRESEK, JOE  
**Address:** 2007 MICHIGAN AVE  
**City-St-Zip:** COCOA, FL 32922

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:** RAMOND KRSEK

PRES

02/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date