

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000153914

Entity Name: GROUNDS N GREENERY, INC.

FILED
Mar 11, 2005
Secretary of State

Current Principal Place of Business:

10042 THOMPSON NURSERY RS
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

10042 THOMPSON NURSERY RD
WINTER HAVEN, FL 33884 US

Current Mailing Address:

2511 FOX RUN CT.
LAKE WALES, FL 33898 US

New Mailing Address:

10042 THOMPSON NURSERY RD
WINTER HAVEN, FL 33884 US

FEI Number: 74-3111218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, DALE E PRES
2511 FOX RUN CT
LAKE WALES, FL 33898 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

OFFICERS AND DIRECTORS:

Title: P, () Delete
Name: HAYES, DALE E PRES
Address: 2511 FOX RUN CT
City-St-Zip: LAKE WALES, FL 33898 US

Title: VP () Delete
Name: SWEENEY, KARL R VP
Address: 5619 EMERALD RIDGE BLVD
City-St-Zip: LAKELAND, FL 33801 US

Title: SEC () Delete
Name: SWEENEY, DEANNE SEC.
Address: 5619 EMERALD RIDGE BLVD
City-St-Zip: LAKELAND, FL 33801 US

Title: TRES () Delete
Name: HAYES, COLLEEN E TRES
Address: 2511 FOX RUN CT
City-St-Zip: LAKE WALES, FL 33898 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: COLLEEN HAYES

TRES

03/11/2005

Electronic Signature of Signing Officer or Director

Date