

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037252

FILED
Apr 10, 2005
Secretary of State

Entity Name: SCHOLL'S NURSERY & LANDSCAPE DESIGN, INC.

Current Principal Place of Business:

3002 BRYAN RD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

3002 BRYAN RD
BRANDON, FL 33511

New Mailing Address:

813 S PARSONS
BRANDON, FL 33511

FEI Number: 20-0731556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQUIRE
LASMAN LAW FIRM, P.A.
115 PROVIDENCE RD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

LASMAN, JEFFREY M ESQUIRE
6152 DELANCY STATION STREET
SUITE 205
RIVERVIEW, FL 33569 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:

04/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: SCHOLL, ZACHARY T
Address: 3002 BRYAN RD
City-St-Zip: BRANDON, FL 33511

Title: DVS () Delete
Name: SCHOLL, II, ZACHARY T
Address: 3002 BRYAN RD
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: SCHOLL, ZACHARY T
Address: 4304 FAIRCOOVRT DR
City-St-Zip: VALRICO, FL 33594

Title: DPS (X) Change () Addition
Name: SCHOLL, II, ZACHARY T
Address: 3002 BRYAN RD
City-St-Zip: BRANDON, FL 33511

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: ZACHARY SCHOLL

D

04/10/2005

Electronic Signature of Signing Officer or Director

Date