

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136054

Entity Name: THE PLANTED POT, INC

FILED  
Apr 27, 2005  
Secretary of State

## Current Principal Place of Business:

4211 5TH AVENUE SOUTH WEST  
NAPLES, FL 34119 US

## New Principal Place of Business:

## Current Mailing Address:

4211 5TH AVENUE SOUTH WEST  
NAPLES, FL 34119 US

## New Mailing Address:

FEI Number: 20-2436075

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YOUNG, CYNTHIA S  
4211 5TH AVENUE SOUTH WEST  
NAPLES, FL 34119 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: YOUNG, CYNTHIA S  
Address: 4211 5TH AVENUE SOUTH WEST  
City-St-Zip: NAPLES, FL 34119 US

Title: VP ( ) Delete  
Name: SIPE, ANDREA A  
Address: 4949 ROYAL PALM DRIVE  
City-St-Zip: ESTERO, FL 33928 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CYNTHIA S YOUNG

P

04/27/2005

Electronic Signature of Signing Officer or Director

Date