2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P06000157135

Entity Name: BROWNING'S NURSERY & LANDSCAPING, INC.

Current Principal Place of Business:

8899 STATE ROAD 82
IMMOKALEE, FL 34142 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 276
IMMOKALEE, FL 34143 US

New Mailing Address:

POST OFFICE BOX 39
LEHIGH ACRES, FL 33970 US

FEI Number: 20-8119348 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWNING, TED R
8889 STATE ROAD 82
IMMOKALEE, FL 34142 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: DPST ( ) Delete
Name: BROWNING, TED R
Address: POST OFFICE BOX 276
City-St-Zip: IMMOKALEE, FL 34143 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: BROWNING, TED R
Address: POST OFFICE BOX 39
City-St-Zip: LEHIGH ACRES, FL 33970 US

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: TED R BROWNING PRES 04/30/2008
Electronic Signature of Signing Officer or Director Date