

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000041254

Entity Name: FLOYD COVE NURSERY, INC.

FILED
Feb 22, 2010
Secretary of State

Current Principal Place of Business:

190 HICKORY WOODS CT
2D
DELTONA, FL 32725 US

New Principal Place of Business:

1036 ENTERPRISE OSTEEN ROAD
ENTERPRISE, FL 32725 US

Current Mailing Address:

190 HICKORY WOODS CT
2D
DELTONA, FL 32725 US

New Mailing Address:

1240 ENTERPRISE OSTEEN ROAD
ENTERPRISE, FL 32725

FEI Number: 26-2600402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, GUY
190 HICKORY WOODS CT
2D
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

PIERCE, GUY
1240 ENTERPRISE OSTEEN ROAD
ENTERPRISE, FL 32725 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:

02/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T
Name: PIERCE, GUY
Address: 1240 ENTERPRISE OSTEEN ROAD
City-St-Zip: ENTERPRISE, FL 32725 US

Title: VP,S
Name: PIERCE, KAREN
Address: 1240 ENTERPRISE OSTEEN ROAD
City-St-Zip: ENTERPRISE, FL 32725 US

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: KAREN PIERCE

VP

02/22/2010

Electronic Signature of Signing Officer or Director

Date