

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000103179

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** HANGING TREE NURSERY, INC.

**Current Principal Place of Business:**

2552 VALERIE AVENUE  
APOPKA, FL 32712 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 962  
APOPKA, FL 32704 US

**New Mailing Address:**

**FEI Number:** 26-3764233

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUTCHING, JEROME  
2552 VALERIE AVEUNE  
APOPKA, FL 32712 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  
Name: HUTCHING, JEROME  
Address: 2552 VALERIE AVENUE  
City-St-Zip: APOPKA, FL 32712 US

Title: T  
Name: HUTCHING, JEROME  
Address: 2552 VALERIE AVENUE  
City-St-Zip: APOPKA, FL 32712 US

Title: S  
Name: HUTCHING, JEROME  
Address: 2552 VALERIE AVENUE  
City-St-Zip: APOPKA, FL 32712 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:** JEROME HUTCHING

P

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date