

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90001 050 ***150.00

DOCUMENT # P19866

1. Entity Name
LEE'S GREENHOUSES, INC.



Principal Place of Business
**2203 W. HAAS RD (APOPKA, FL 32703)
P.O. BOX 997
SORRENTO, FL 32776-0997**

Mailing Address
**608 SPRING VALLEY RD.
ALTAMONTE SPRINGS, FL 32714**

54072251



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09012004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

31-1190978

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MORRISON, RICHARD LEE
2203 WEST HAAS ROAD
APOPKA, FL 32776**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PS ☐ Delete
NAME MORRISON, RICHARD LEE
STREET ADDRESS 608 SPRINGS VALLEY RD
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE TD ☐ Delete
NAME MORRISON, RICHARD LEE
STREET ADDRESS 608 SPRINGS VALLEY RD
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard Morrison*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-7-04

Date

407-880-2262

Daytime Phone #

Attachment
LEE'S GREENHOUSES, INC.

P.O. BOX 997
SORRENTO, FLORIDA 32776
(407) 880-2262

54072251
P19866

I have filed this report for years but
this year I did not receive the report.
When I did go online and entered my
number it was invalid, I looked up my
Corp # in your data base and it too was
invalid. I have been through two businesses
and cant reach anyone.

Ritch Morrison