2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P92000000737 **DOCUMENT#**

1. Entity Name

FLORIDA NATIVE FLORA, INC.



Principal Place of Business 6839 OLD POLK CITY RD

LAKELAND FL 33810 US

Mailing Address P O BOX 2291

LAKELAND FL 33806

Apr 07, 2003 8:00 am \$ Secretary of State **FILED**



Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Suite, Apt. #, etc. City & State A. FEI Number 59-3150828 Applied For Not Appli	2 Principal	Place of Busin	1000	3. Mailing Address	·				
City & State Country Country Country Country Country Country Country S. Certificate of Status Desired \$8.75 Additional Fee Required Fee Required Street Address of New Registered Agent City 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 diffice or registered agent, or both, in the State of Florida. I am familiar with, and acceptable of Portage agent. Signatrue, Uprod or prince came of registered agent and the Tapplicable FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State DPTS DPTS	2. Principal Place of Business			3. Mailing Address					
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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:

Date

Daytime Phone #