Mar 09, 1999 8:00 am Secretary of State

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## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P93000056410**

1. Corporation Name

BATSON'S GREENHOUSE, INC.

									<b>                                   </b>
Principal Place	e of Business	Mailing Address			118611	Måt trå thian titti äntri na	fil 86411 <b>46161</b> 21	110 B4119 B1001	
2649 BRITT ROAD		P.O. BOX 1410							
MT DORA FL 32757		MT. DORA FL 32756			DO NOT WRITE IN THIS SPACE				
US		US			3. Date Inco	morated or Qualifed			
					08/09/1				i
2. Principal Pl	lace of Business	2a. Mailing Addres	s		4. FEI Numb			Ap	plied For
21		26			59-3196	67 <u>45</u> -	<u> </u>	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, e	tc.		5 Certificate	of Status Desired		\$8.75 A	
22		27			S. Continuate			Fee Re	<u> </u>
City & State	e	City & State			l l	Campaign Financing		\$5.00	
23	······	28			<del></del>	d Contribution		Added t	o Fees
Zip	Country	Zip	Count	У	· · · · ·	oration owes the cur			□No
24	25	29	30			Property Tax.  d Address of New I			
	9. Name and Address of Curre	ent Registered Agent	8	1 Name	iv. Haine an	u Addiesa of He	regiotorea /	~	
RATS	SON, GENE A								
1	BRITT ROAD		8		Address (P.O. Box N 01 Britt		able)		
	ORA FL 32757		8		OI BIICC	<u>Koau</u>			
2	0.5112 02.0.							, ,	
			8	4 City M+	. Dora,		FI	85 Zio (	Code 757
11 Durement	to the provisions of Sections 607.05	502 and 607 1508 Florida	Statutes, the abo	vo namod	corporation submits t	his statement for the	purpose of c	hanging its	registered
office or r	enistered agent or both in the Stat	e of Florida. Such change	was authorized b	v the corpo	oration's board of dire	ectors. I hereby acce	pt the appoint	tment as re	gistered
_	m familiar with, and accept the oblig	gations or, Section 607.03	OS, FIORICA STATULE	3.					
SIGNATURE						•			
í	Signature, typed or printed name of registered as	gent and title if applicable.	(NOTE: Registered Ag	ent signature r	required when reinstating)		DATE		
12.	Signature, typed or printed name of registered as OFFICERS A	gent and title if applicable. AND DIRECTORS	(NOTE: Registered Ag	ent signature r	ADDITION	S/CHANGES TO OF	FICERS AND		
12.		<del>` </del>	13.			S/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12
<del></del> -	OFFICERS A	AND DIRECTORS	13.	<del>`</del>	ADDITION		FICERS AND		
TITLE	PD BATSON, GENE A	AND DIRECTORS	13. ETE 1.1 TITLE 1.2 NAME	<del>`</del>	PD Batson, (	Gene A. tt Road	FICERS AND		
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

∠ Gene A. Batson

3/01/99