

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000068424

**Entity Name:** MERCER BOTANICALS, INC.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6225 SADLER ROAD  
ZELLWOOD, FL 32798

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1328  
ZELLWOOD, FL 32798 US

**New Mailing Address:**

**FEI Number:** 59-3201953

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERCER, WAYNE  
6225 SADLER RD.  
ZELLWOOD, FL 32798 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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MERCER, WAYNE  
**Address:** 1781 EDGEWATER DRIVE  
**City-St-Zip:** MOUNT DORA, FL 32757

**Title:** STD  
**Name:** MERCER, CHRISTINE  
**Address:** 1781 EDGEWATER DRIVE  
**City-St-Zip:** MOUNT DORA, FL 32757

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:** CHRISTINE MERCER

OWNE

02/09/2012

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

\_\_\_\_\_  
Date