

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P94000071821

1. Entity Name
SOUTHEASTERN HORTICULTURE, INC.



Principal Place of Business
9764 - 150TH CT. N.
JUPITER, FL 33478

Mailing Address
PO BOX 2650
JUPITER, FL 33468-2650

FILED

06 JUL 14 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07112006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0551627

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SARDONE, JERRY G JR
9764-150TH CT. N.
JUPITER, FL 33478

7. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME PTSC
STREET ADDRESS SARDONE, JERRY G JR
CITY-ST-ZIP 9754-150TH CT. N.
JUPITER, FL 33478 ☐ Delete

TITLE
NAME V
STREET ADDRESS BRUENN, ERIC G
CITY-ST-ZIP 9764 150TH CT. N.
JUPITER, FL 33478 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/C/M ☒ Change ☐ Addition
NAME SARDONE, JERRY G., JR.
STREET ADDRESS 9764 - 150th Ct. N.
CITY-ST-ZIP Jupiter, FL 33478

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

TITLE V
NAME SCHOEN, CAROL M.
STREET ADDRESS 9764 - 150th Ct. N.
CITY-ST-ZIP Jupiter, FL 33478 ☐ Change ☒ Addition

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

TITLE T/S/D
NAME YARNICK, ELEANOR L.
STREET ADDRESS 9764 - 150th Ct. N.
CITY-ST-ZIP Jupiter, FL 33478 ☐ Change ☒ Addition

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 a address, with all other like empowered.

SIGNATURE: _____
JERRY G. SARDONE, JR., President

07/10/06 561-745-0811

Date Daytime Phone #