## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1990	COD WE THE	DIVISION OF C		
DOCUMENT #	P94000070	3000 (3)		

1. Corporation	Name - HORTICULTURE, INC		(0)						
Principal Place of Business Mailing Address  4336 60TH AVENUE P O BOX 1391 VERO BEACH FL 32961 VERO BEACH FL 32961				B4r 9044 4044 <b>43</b> 44	I <b>ud</b> ha h <b>ual</b> a irafa <b>u</b> i	OTH DOWN SOLA FOR			
US					3. Date incorporated or 10/27/1994	Qualified 3s	n. Date of Last (		
2. Principal Place of Business 2a. Mailing Address		S		4. FEI Number					
26   Suite, Apt. #, etc.   Suite, Apt. #, etc.		to.	·			Not Applicable  \$8.75 Additional			
27				5. Certificate of Status E	Desired		Required		
City & State	3	City & State			6. Election Campaign Fir	·		00 May Be	
<b>23</b> Zip	Country	28 Zip	Countr	Trust Fund Contributi		<i></i>	Accept to Fees		
24	25	29	30	,	8. This corporation has I Florida Statutes		gible tax under s No	s 199.032,	
	9. Name and Address of C	urrent Registered Agent			10. Name and Address		•		
<b></b>			8.	Name					
	GEORGE A		82	2 Street	Address (P.O. Box Number is Not	Acceptable)			
7555 20	JIH SI BEACH FL			<b>.</b>				···	
VERO D	EACH FL		83	<b>'</b>				1	
			84	City			FI 85 Z	'n Code	
11. Pursuant t or register familiar wit	to the provisions of Sections 607 ed agent, or both, in the State of the and accept the obligations of	.0502 and 607,1508, Florida S f Florida. Such change was aut Section 607,0505, Florida Sta	Statutes, the above thorized by the con	named co poration's	orporation submits this statement board of directors. I hereby accep	for the purpose of the appointm	of chancing its	registered office d agent. I am	
SIGNATURE	and accept the obligations of	. Decision our loods, Florida dia	itatos.						
	Signature, typed or printed name of registers			ent signature re	equired when reinstating!		DATE		
12.	OFFICER	RS AND DIRECTORS  DELETE	13.		ADDITIONS/CHANGE:	S TO OFFICER		<u></u>	
NAMÉ	WINGATE, JAMES V	Detele	1. 1 TITLE 1.2 NAME				Change Change	Addition	
STREET ADDRESS	30 1ST CT SW			T ADORESS	4030 43 PM A	VENUE			
CITY-ST-ZIP	VERO BEACH FL 32962	!	1.4 CITY-		VERED BETTELL,	FL 32	960		
TITLE	D	☐ DELETE			,	<u> </u>	Change	Addition	
NAME	GILES, THOMAS M		2.2 NAME						
STREET ADDRESS	4336 60TH AVE		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	VERO BEACH FL 32967		2 4 CITY -	ST - ZIP					
TITLE		☐ DELETE	3. 1 TITLE	ľ			☐ Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS				T ADDRESS					
COY-SI-ZIP TOLE		DELETE	34 CITY-	ST-ZIP				<b>C</b>	
NAME			4.2 NAME				∟ unange	Addition	
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			4.3 SINCE						
TITLE	······································	☐ DELETE		Ø1 = £Π		<del></del> -	Change	Addition	
NAME		—	5.2 NAME				Land Orner Mo		
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			5.4 CITY -	ST-2IP				1	
TITLE		☐ DELETE	6. 1 TITLE				Change	Addition	
NAME			62 NAME						
STREET ADDRESS			6.3 STREE	ADDRESS					
CITY-S1-ZIP			64 DITY-5	ST. 7IP				1	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/96 407-770-0057