


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90127 018 ***150.00

DOCUMENT # P95000032954	
1. Entity Name Garden Concepts Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 700 Lloyd Street Suite, Apt. #, etc.	3. Mailing Address 700 Lloyd Street Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Ft Walton Beach	City & State Ft Walton Beach FL	4. FEI Number 59-3317337	Applied For <input type="checkbox"/> Not Applicable
Zip FL 32547	Country US	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Henry Mersereau
Street Address (P.O. Box Number is Not Acceptable) 700 Lloyd Street
City Ft Walton Beach FL
Zip Code 32547

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

January 1 - May 1: Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP P Henry Mersereau 700 Lloyd Street Ft Walton Beach FL 32547	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Henry Mersereau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-03

Date

850-864-1713

Daytime Phone #