

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007671

FILED
Apr 08, 2007
Secretary of State

Entity Name: LIVING FOSSIL NURSERY, INC.

Current Principal Place of Business:

40410 COUNTY RD. 452
LEESBURG, FL 34788

New Principal Place of Business:

Current Mailing Address:

40410 COUNTY RD. 452
LEESBURG, FL 34788

New Mailing Address:

FEI Number: 65-0653412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, L.E.
1029 W. MAGNOLIA ST.
LEESBURG, FL US

Name and Address of New Registered Agent:

TAYLOR, L.E.
1029 W. MAGNOLIA ST.
LEESBURG, FL 34749 US

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:

04/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRANDT, FRANK A
Address: 40410 COUNTY RD. 452
City-St-Zip: LEESBURG, FL

Title: ST () Delete
Name: BARBER, LARRY R
Address: 344 DONNA LANE
City-St-Zip: FAIRVIEW, NC 28730

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: FRANK A. BRANDT

P

04/08/2007

Electronic Signature of Signing Officer or Director

Date