## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000084709 (0)

EARTH GARDEN, INC.

**FILED** Mar 05 1998 8:00am Secretary of State

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Principal Place o	of Business	Mailing Address							
6225 POWERS AVENUE SUITE 100 JACKSONVILLE FL 32207 US		4215 SOUTHPOINT SUITE 100 JACKSONVILLE FL		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  10/14/1996					
2. Principal Place of Business		2a. Mailing Address	\$	4. FEI Number	Applied For				
สโ		26		59-3411495	Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, et	c	5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution					
Zip	Country 25	Z <sub>I</sub> p	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
71	e Name and Address of Cu		<del></del>	10. Name and Address of New Registered Agent					
ANSBACHER, LEWIS									
4215 SOUTHPOINT BLVD SUITE 100									
JACK	SONVILLE FL 32216		83						
			84 City	FL	85 Zip Code				
office or regi	the provisions of Sections 607 istered agent, or both, in the Stamiliar with, and accept the c	State of Florida. Such change	was authorized by the cor:	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appo	changing its registered bintment as registered				

agent. 1 a	am ramiliar with, and accept the obligations	or, section 607.0505, Flor	iua statutes.				
SIGNATURE	Signature, typed or printed name of registered agent and to	lu if applicable (NOTE	Registered Agent signature	required when reinstating)	DATE		
12.	OFFICERS AND DIRE	13. ADDITIONS/CHANGES TO OFFIC			ERS AND DIRECTORS IN 12		
TITLE	DV	DELE <b>te</b>	1.1 TITLE			Change	Addition
NAME	PRISOC, JOHN		1,2 NAME				
STREET ADDRESS	6225 POWERS AVENUE		1.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP				
TITLE	DV	DELE <b>TE</b>	2.1 TITLE		- "	Change	Addition
NAME	CURTIS, HILL		2.2 NAME				
STREET ADDRESS	6225 POWERS AVENUE		2.3 STREET ADDRESS		S 60		
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP				
TITLE	DS	☐ DELE <b>TE</b>	3.1 TITLE		į	Change	Addition
NAME	BETH, ANGELO		3.2 NAME				
STREET ADDRESS	6225 POWERS AVENUE		3.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		3.4. C(TY-ST-ZIP	<b>3 3 3 3 3 3 3 3 3 3</b>			<u></u>
TITLE	P	DELETE	4.1 TITLE	$\nu$	İ	Change	Addition
NAME	JARROLD, ROSENBAUM		4. 2 NAME				
STREET ADDRESS	6225 POWERS AVENUE		4.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY - ST - ZIP				<del></del>
T₹TLE		☐ DELETE	5.1 TITLE	D		Change	Addition
NAME	BAUGUSS, LAURIE		5.2 NAME				
STREET ADDRESS	6225 POWERS AVENUE		5.3 STREET ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY - ST - ZIP				
TITLE		☐ DELE <b>te</b>	6.1 TITLE		1	Change	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

14. 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 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.

Cartie V Hill 1/26/98

(904) 737-10811