

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028838

FILED  
May 19, 2009  
Secretary of State

Entity Name: SHOWCASE GARDENS, INC.

**Current Principal Place of Business:**

5201 ORANGE DRIVE  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

5201 ORANGE DRIVE  
DAVIE, FL 33314

**New Mailing Address:**

FEI Number: 65-0783774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROTBART, ALEXANDER B ESQ  
ROTBART & DEUTSCH, P.A.  
105 EAST PALMETTO PARK ROAD  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BURCH, CLAYTON  
Address: 5201 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33314

Title: STD ( ) Delete  
Name: BURCH, CAROL  
Address: 5201 ORANGE DRIVE  
City-St-Zip: DAVIE, FL 33314

**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 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: CLAYTON T. BURCH

PRES

05/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date