

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105019

Entity Name: J D F LANDSCAPE NURSERY, INC.

FILED  
Jan 30, 2005  
Secretary of State

**Current Principal Place of Business:**

3574 ONDICH RD.  
APOPKA, FL 32712

**New Principal Place of Business:**

2436 HIGHLAND AVE.  
APOPKA, FL 32712

**Current Mailing Address:**

10492 LARSON BAY LANE  
COLLIERVILLE, TN 38017

**New Mailing Address:**

2436 HIGHLAND AVE.  
APOPKA, FL 32712

FEI Number: 59-3488349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FLEMING, JEFFREY  
3574 ONDICH RD.  
APOPKA, FL 32712 US

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

FLEMING, JEFFREY  
2436 HIGHLAND AVE.  
APOPKA, FL 32712 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/30/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: FLEMING, JEFFREY  
Address: 3574 ONDICH RD  
City-St-Zip: APOPKA, FL 32712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: JEFFREY D. FLEMING

Electronic Signature of Signing Officer or Director

DPST

01/30/2005

Date