

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000069208

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** SANDS SUNSET VISTA NURSERY, INC.

**Current Principal Place of Business:**

900 SUNSET VISTA DRIVE  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

900 SUNSET VISTA DRIVE  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 65-0852171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANDS, RAYMOND J  
900 SUNSET VISTA DRIVE  
FORT MYERS, FL 33919 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** SANDS, THERESA P  
**Address:** 900 SUNSET VISTA DRIVE  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** PTS  
**Name:** SANDS, RAYMOND J  
**Address:** 900 SUNSET VISTA DR  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** V  
**Name:** SANDS, MICHAEL D  
**Address:** 809 SUNSET VISTA DR  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** D  
**Name:** SANDS, STEVEN A  
**Address:** 8817 SOMERSET BLVD  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** D  
**Name:** FICRRO, ANTHONY C  
**Address:** 665 ASTARIAS CIRCLE  
**City-St-Zip:** FORT MYERS, FL 33919

I hereby 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 all other like empowered.

**SIGNATURE:** RAYMOND J. SANDS

PTS

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date