

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020854

Entity Name: MARKEN NURSERY, INC.

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

17430 SW 61 COURT  
SW RANCHES, FL 33331 US

## New Principal Place of Business:

## Current Mailing Address:

17430 SW 61 COURT  
SW RANCHES, FL 33331 US

## New Mailing Address:

FEI Number: 65-0901893

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

URIBE, LUZ PIEDAD  
17430 SW 61 COURT  
SW RANCHES, FL 33331 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 ( ) Delete  
Name: URIBE, LUZ PIEDAD  
Address: 17430 SW 61 COURT  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D ( ) Delete  
Name: MARKEN, FRANS  
Address: 17430 SW 61 COURT  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: URIBE, LUZ PIEDAD  
Address: 17430 SW 61 COURT  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: VP (X) Change ( ) Addition  
Name: MARKEN, FRANS  
Address: 17430 SW 61 COURT  
City-St-Zip: SOUTHWEST RANCHES, FL 33331

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: /LUZ PIEDAD URIBE/

D

04/14/2009

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

\_\_\_\_\_  
Date