

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S69626

Entity Name: JAN'S NURSERY, INC.

FILED
Mar 23, 2005
Secretary of State

Current Principal Place of Business:

10765 S. US HIGHWAY 41
DUNNELLON, FL 34430

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 662
DUNNELLON, FL 34430

New Mailing Address:

FEI Number: 59-3076927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEWITT, JANICE M
19480 SW 36TH ST
DUNNELLON, FL 34431 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: PST () Delete
Name: DEWITT, JANICE M.,
Address: 19480 SW 36TH ST
City-St-Zip: DUNNELLON, FL 34431

Title: VP () Delete
Name: DEWITT, KEVIN L
Address: 19484 SW 36TH STREET
City-St-Zip: DUNNELLON, FL 34431

Title: VP () Delete
Name: DEWITT, JEFFERY
Address: 19480 SW 36TH STREET
City-St-Zip: DUNNELLON, FL 34430

Title: VP () Delete
Name: DEWITT, LEO
Address: PO BOX 1658
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DEWITT, KEVIN L
Address: 20303 SW 69TH PL
City-St-Zip: DUNNELLON, FL 34431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DEWITT, LEO
Address: 19480 SW 36TH ST
City-St-Zip: DUNNELLON, FL 33431

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: JANICE M. DEWITT

PRES

03/23/2005

Electronic Signature of Signing Officer or Director

_____ Date