## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V32441

City-St-Zip:

SORRENTO, FL 32776

Entity Name: PIXLEY GREENHOUSES INC.

FILED Jul 13, 2007 Secretary of State

Littly Nai	HE. FIXEET	GREENHOUSES, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
20900 HW EUSTIS, F		JS			
Current Mailing Address:			New Mailing Address:		
P.O. BOX EUSTIS, F					
FEI Number:	: 59-3120363	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	HOMAS D REL RIDGE D ORA, FL 327				
	named entity of Florida.	submits this statement for the	purpose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution (  ).	ot receive the prior notice	e.	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PIXLEY, THO	RIDGE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( PIXLEY, MAR 8065 LAUREL MOUNT DORA	RIDGE DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	PIXLEY-CON	) Delete NOR, MELISSA P	Title: Name:	P (X) Change ( ) Addition CONNOR, MELISSA P 23134 OAK CLUSTER DRIVE	

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.

City-St-Zip: SORRENTO, FL 32776

SIGNATURE: MELISSA P CONNOR P 07/13/2007