

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V40926

Entity Name: HORTISCAPES, INC.

FILED
Feb 19, 2004
Secretary of State

Current Principal Place of Business:

440 MYRA STREET
NEPTUNE BEACH, FL 32266 US

New Principal Place of Business:

2007 GROVE ST.
JACKSONVILLE BEACH, FL US

Current Mailing Address:

440 MYRA STREET
NEPTUNE BEACH, FL 32266 US

New Mailing Address:

139 ALTAMA CONN. #332
BRUNSWICK, GA 31525 US

FEI Number: 65-0336188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, GEORGE F.
440 MYRA ST
NEPTUNE BEACH, FL 32266 US

Name and Address of New Registered Agent:

FREEMAN, GEORGE F.
2007 GROVE ST.
JACKSONVILLE BEACH, FL 31525 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: GEORGE F. FREEMAN

02/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FREEMAN, GEORGE F.,
Address: 440 MYRA STREET
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FREEMAN, GEORGE F.,
Address: 139 ALTAMA CONN. #332
City-St-Zip: BRUNSWICK, GA 31525

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: GEORGE F. FREEMAN

P

02/19/2004

Electronic Signature of Signing Officer or Director

Date