2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H50837

Entity Name: C. D. NURSERY, INC.

Current Principal Place of Business:

C. D. NURSERY, INC. 139 DEMOTT ROAD MONTICELLO, FL 32344

Current Mailing Address:

C.D. NURSEY, INC. ATTN: DAVID HAMILTON

P.O. BOX 137

MONTICELLO, FL 32345 US

FEI Number: 59-2784584 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMILTON, DAVID L. 1878 N JEFFERSON MONTICELLO, FL 32344 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:

Electronic Signature of Registered Agent

Address

1878 N JEFFERSON

Officer/Director Detail:

Title PRES Title TRES

Name HAMILTON, MARCELINE S. Name HAMILTON, DAVID L

PRESIDENT

Address C.D. NURSEY, INC. ATTN: DAVID
HAMILTON City-State-Zip: MONTICELLO FL 32344

HAMILTON P.O. BOX 137

City-State-Zip: MONTICELLO FL 32345 Title SEC

Name WAGNER, CYNTHIA H.

Title VP

Address 719 THISTLEWOOD DRIVE
Name HAMII TON, MARCELINE

Name HAMILTON, MARCELINE
City-State-Zip: HOUSTON TX 77079
Address 1750 N JEFFERSON

City-State-Zip: MONTICELLO FL 32344

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: DAVID HAMILTON TREASURER

Electronic Signature of Signing Officer/Director Detail

04/10/2017 Date

Date

FILED Apr 10, 2017

Secretary of State

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