

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158523

Entity Name: HILL COUNTRY NURSERIES, INC.

Current Principal Place of Business:

15105 ROBERTS WAY
LOXAHATCHEE, FL 33470

Current Mailing Address:

15105 ROBERTS WAY
LOXAHATCHEE, FL 33470

FEI Number: 74-2283359

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TONKINS, DONALD R
15105 ROBERTS WAY
LOXAHATCHEE, FL 33470 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

Date

Officer/Director Detail :

Title	PSD	Title	VTD
Name	TONKINS, DONALD R	Name	TONKINS, CATHERINE
Address	15105 ROBERTS WAY	Address	15105 ROBERTS WAY
City-State-Zip:	LOXAHATCHEE FL 33470	City-State-Zip:	LOXAHATCHEE FL 33470

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: CATHERINE TONKINS

VICE PRESIDENT

02/04/2013

Electronic Signature of Signing Officer/Director Detail

Date