## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(0)

|  | MESSMER FLORIST, INC  |  |   |  |   |
|--|---|--|---|--|---|
| Principal Place o<br><b>3366 CLEVE</b><br>P.O. BOX 84<br>FORT MYER | LAND AVE  | Mailing Address 3366 CLEVELAND AVE P.O. BOX B48 FORT MYERS FL 33902-0848 |   |  |   |
| US   |   | US   |   | 3. Date Incorporated or Qualified 11/01/19/0   | 3a. Date of Last Recort<br>03/21/1995                                     |
| 2. Principal Plac  | e of Business   | 2a. Mailing Address 26   |   | 4. FEI Number<br>59-1306019  | Applied For Not Applicable  |
| Suite, Apt. #. etc.  |   | Suite, Apt. #, etc.  |   | 5. Certificate of Status Desired   | \$8.75 Additional Fee Required  |
| City & State   |   | City & State   |   | Election Campaign Financing     Trust Fund Contribution  | \$5.00 May Be<br>Added to Fees  |
| Ζφ<br>]  | Country 25  | Zip<br><b>29</b>   | Country 30  | 8. This corporation has liability for inter-<br>Florida Statutes Yes   | □No   |
|  | 9. Name and Address of Currer   | nt Registered Agent  | 81 Name •   | 10. Name and Address of New Reg  | listered Agent  |
| FRANKLIN JR,JAMES A<br>2100 SECOND STREET<br>FORT MYERS FL 33901   |   |  |   | ess (P.O. Box Number is Not Acceptable)  | FL 85 Zip Code  |
| SIGNATURE s  | gradin. Njict o printet na k ot regi treed agen:  | RICIANS MIS  | s, the above-named corporation's board by the corporation's boards.  SS Mar- E- Registered Agent signature require  13. | ration submits this statement for the purpord of directors. I hereby accept the appoint when reliatating:  ADDITIONS/CHANGES TO OFFICE | ose of changing its registered office<br>itment as registered agent. I am |
| 12.  | CD OFFICERS AN  | D DIRECTORS  |   | ADDITIONS/CHANGES TO OFFICE  | Change Addition   |
| MLF  | MESSMER, RUTH   |  | 1. 1 TITLE  |  | Cutting   Madition  |
| AMĒ  | 5563 TRELLIS LN   |  | 1.2 NAME  |  |   |
| TREET ADDRESS  | FT MYERS, FL 00000  |  | 1.3 STREET ADDRESS  | 77010  |   |
| HY S1-ZIP  | VD  | [7] DELFTE   | 1.4 CHY-S (2IP)<br>2 1 TITLE  | 33919  | Change [] Addition  |
| AMI  | MESSMER, HEATHER  | LJourn   | 2 2 NAME  |  | - Tagnesi   |
| i  | 1605 CORONADO   |  | 3 STREET ADDRESS  | 1060 mandle  | 4.0   |
| TREET ADDRESS  | FT. MYERS FL  |  | 24 DITY-ST (ZIP)  | 1960 MARAVILLA<br>FT. Myors FL   | 7VC   |
| itY+S1+ZiP<br>ItLE   | PD  | □ DELETE   | 3 1 TITLE   | 7 7 7 7  | C effange Addition  |
| 4V:  | MESSMER, RICHARD P  | L  | 3 2 NAME  |  |   |
| IREET ADDRESS  | 106 PLACID DR   |  | 3.3 STREET ADDRESS  |  |   |
| -FY-ST-ZP  | FT MYERS, FL 00000  |  | 34 CITY-ST (ZIP)  | 33919  | •   |
| TLF  |   | [] DELETE  | 4 1 TITLE   |  | Change Addition   |
| 4Mi  |   | <del></del>  | 4 2 NAME  |  |   |
| IRELL ADDRESS  |   |  | 4 3 STREET ADDRESS  |  |   |
| 1Y-S1-7P   |   |  | 4 4 CITY - ST - ZIP   |  |   |
| TLE  |   | ☐ DELETE   | 5 1 TITLE   |  | Change Addition   |
| 4ME  |   | -  | 5 2 NAME  |  |   |
| IREET ACIORESS   |   |  | 5.3 STREET ADDRESS  |  |   |
| 1 v - \$1 - 7iP  |   |  | 54 CITY-ST-ZIP  |  |   |
| 1LE  |   | ☐ DELETE   | 6 1 TITLE   |  | ☐ Change ☐ Addition   |
| AM1  |   |  | 6 2 NAME  |  | _   |
| IKEFT ADDRESS  |   |  | § 3 STREET ADDRESS  |  |   |
| ITY-SI ZIP   |   |  | 6 4 CITY-ST-ZIP   |  |   |
| 4. I do hereby   | certify that the information supplied   | with this filing is voluntarily furn                                     | ished and does not qualify t  | or the exemption stated in Section 119.07  | '(3)(k), Florida Statutes. I further                                      |
| oath; that I   | the information indicated on this ann<br>ann an officer or director of the corpo<br>Block 12 of Block 13 if changed, or | oration or the receiver or truster                                       | e empowered to execute th   | ate and that my signature shall have the sa<br>is report as required by Chapter 607, Flori   | ame legal effect as if made under<br>da Statutes; and that my name        |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

Richard Massmar 17 Law 96 941-936-2131