

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071717

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** LORI ANN'S GREETING CARD OUTLET, INC.

**Current Principal Place of Business:**

3336 U.S. HIGHWAY 19  
HOLIDAY, FL 34691

**New Principal Place of Business:**

**Current Mailing Address:**

3336 U.S. HIGHWAY 19  
HOLIDAY, FL 34691

**New Mailing Address:**

**FEI Number:** 74-3095677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STOLITZA, LORI ANN  
3336 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**Name and Address of New Registered Agent:**

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PRES ( ) Delete  
**Name:** STOLITZA, LORI A  
**Address:** 3336 U.S. HWY. 19  
**City-St-Zip:** HOLIDAY, FL 34691

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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.

**SIGNATURE:** LORI ANN STOLITZA

PRES

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date