

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082726

FILED
Aug 10, 2007
Secretary of State

Entity Name: NORTH PALM BEACH FLOWERS & GIFTS, INC.

Current Principal Place of Business:

5157 ELPINE WAY
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

9092 ALTERNATE A1A
NORTH PALM BEACH, FL 33403

Current Mailing Address:

5157 ELPINE WAY
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 14-1981194 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NELSON, ADRIENNE L
5157 ELPINE WAY
PALM BEACH GARDENS, FL 33418 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: NELSON, ADRIENNE L
Address: 5157 ELPINE WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: ADRIENNE NELSON

PRES

08/10/2007

Electronic Signature of Signing Officer or Director

Date