

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 487834

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: AMERICAN FLORAL COMPANY

## Current Principal Place of Business:

1910 PARK MEADOW DR.  
P.O. BOX 7023  
FT MYERS, FL 33911

## New Principal Place of Business:

1910 PARK MEADOWS DR.  
FT MYERS, FL 33907

## Current Mailing Address:

1910 PARK MEADOW DR.  
P.O. BOX 7023  
FT MYERS, FL 33911

## New Mailing Address:

1910 PARK MEADOWS DR.  
FT MYERS, FL 33907

FEI Number: 59-1697158

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELLIS, MARY NAN  
1910 PARK MEADOW DRIVE  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

MARI ROXANNE PLEVA  
1910 PARK MEADOW DRIVE  
FORT MYERS, FL 33907 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: MARI ROXANNE PLEVA

01/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: STACHEL, JOSEPH A  
Address: 1910 PARK MEADOW DRIVE  
City-St-Zip: FT MYERS, FL

Title: VRA ( ) Delete  
Name: PLEVA, MARI R  
Address: 1910 PARK MEADOWS DRIVE  
City-St-Zip: FT. MYERS, FL 33907 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARI ROXANNE PLEVA

VP

01/13/2005

Electronic Signature of Signing Officer or Director

Date