

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 575055

FILED
Apr 20, 2009
Secretary of State

Entity Name: BUTLER'S FLORIST, INC.

Current Principal Place of Business:

430 RACETRACK RD, NE
FT. WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

430 RACETRACK RD., NE
FT. WALTON BEACH, FL 32547 US

New Mailing Address:

PO BOX 4206
FT. WALTON BEACH, FL 32549 US

FEI Number: 59-1836476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RISHER, BUTLER SUSAN
430 RACETRACK RD, NE
FT. WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

RISHER, BUTLER SUSAN
705 TROWBRIDGE AVE
FT. WALTON BEACH, FL 32547 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: SUSAN BUTLER RISHER

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: RISHER, DAWN M
Address: 515 LANDVIEW APT C
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: P () Delete
Name: RISHER, MARY SUSAN
Address: 705 TROWBRIDGE AVENUE
City-St-Zip: FT. WALTON BCH., FL

Title: T () Delete
Name: HARRISON, ANN
Address: 231 TIMBERLANE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BECKNER, DAWN M
Address: 713 GIBBS AVE
City-St-Zip: FORT WALTON BEACH, FL 32547

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 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: MARYSUSAN BUTLER RISHER

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date