2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007
Secretary of State

DOCUMENT# 583552

Entity Name: ALTAMONTE SPRINGS FLORIST, INC.

Current Principal Place of Business:

801 W. SR 436
#1005
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

801 WEST SR 436
#1005
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 59-1845399 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEDLOW, KENNETH C PRES
801 W. SR 436
STE. 1005
ALTAMONTE SPRINGS, FL. K, FL 32714 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: PD ( ) Delete
Name: PEDLOW, KENNETH C PRES
Address: 118 COUNTRYSIDE DR.
City-St-Zip: LONGWOOD, FL 32779 US

Title: STD ( ) Delete
Name: TERRI, A P S/T
Address: 118 COUNTRYSIDE DR.
City-St-Zip: LONGWOOD, FL 32779 US

Title: VD ( ) Delete
Name: ROSS, LOUIS G VP
Address: 540-206 CRANES WAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: LOUIS G ROSS VP 03/12/2007
Electronic Signature of Signing Officer or Director Date