

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F50507

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: THE FLOWER CONE, INC.

## Current Principal Place of Business:

10414 N. WOODMERE RD.  
TAMPA, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 292785  
TAMPA, FL 336872785

## New Mailing Address:

FEI Number: 59-2126938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHAPMAN, CHRIS  
10414 N. WOODMERE RD  
TAMPA, FL 33617 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: DPT ( ) Delete  
Name: CHAPMAN, CHRIS  
Address: 11140 N. 30TH STREET  
City-St-Zip: TAMPA, FL 33612

Title: DVS ( ) Delete  
Name: WARMACK, MARY  
Address: 11140 N. 30TH STREET  
City-St-Zip: TAMPA, FL 33612

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: CHAPMAN, CHRIS  
Address: 10414 N. WOODMERE ROAD  
City-St-Zip: TAMPA, FL 33617

Title: DVS (X) Change ( ) Addition  
Name: WARMACK, MARY  
Address: 10414 N. WOODMERE ROAD  
City-St-Zip: TAMPA, FL 33617

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: CHRIS CHAPMAN

PRES

04/28/2008

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

\_\_\_\_\_  
Date