

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H78536

FILED
Feb 10, 2009
Secretary of State

Entity Name: ABERCROMBIE'S FLOWER MARKET, INC.

Current Principal Place of Business:

200 FIRST ST. SOUTH
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

200 FIRST ST. SOUTH
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 59-2614654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABERCROMBIE, GREG
108 LOWELL ROAD
WINTER HAVEN, FL 33884 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: MPT () Delete
Name: ABERCROMBIE, GREG
Address: 1108 LOWELL RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: VS () Delete
Name: ABERCROMBIE, MINDY
Address: 144 AVE B SW
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MPT (X) Change () Addition
Name: ABERCROMBIE, GREG
Address: 108 LOWELL RD
City-St-Zip: WINTER HAVEN, FL 33884

Title: VS (X) Change () Addition
Name: ABERCROMBIE, MINDY
Address: P O BOX 2816
City-St-Zip: WINTER HAVEN, FL 33883

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: MINDY ABERCROMBIE

VS

02/10/2009

Electronic Signature of Signing Officer or Director

Date