

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# J01449

**FILED**  
**Nov 22, 2011**  
**Secretary of State**

**Entity Name:** PETAL PUSHER FLORIST, INC.

**Current Principal Place of Business:**

739 EAST SILVER SPRINGS BLVD.  
OCALA, FL 34470 US

**New Principal Place of Business:**

739 EAST SILVER SPRINGS BLVD.  
101  
OCALA, FL 34470 US

**Current Mailing Address:**

739 EAST SILVER SPRINGS BLVD.  
OCALA, FL 34470 US

**New Mailing Address:**

739 EAST SILVER SPRINGS BLVD.  
101  
OCALA, FL 34470 US

**FEI Number:** 59-2650227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRULUCK, DANIEL W.  
1245 SE 14TH STREET  
OCALA, FL 34471 US

**Name and Address of New Registered Agent:**

TRULUCK, DANIEL W  
1245 SE 14TH STREET  
OCALA, FL 34471 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: DANIEL W. TRULUCK

11/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: TRULUCK, DANIEL W  
Address: 1245 SE 14TH STREET  
City-St-Zip: OCALA, FL 34471

Title: VP  
Name: TRULUCK, LAURIE ANN  
Address: 1245 SE 14TH STREET  
City-St-Zip: OCALA, FL 34471

I hereby 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 all other like empowered.

SIGNATURE: DANIEL W. TRULUCK

PRES

11/22/2011

Electronic Signature of Signing Officer or Director

Date