2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008
Secretary of State

DOCUMENT# J22208

Entity Name: FLOWERS CHEMICAL LABORTORIES, INC.

Current Principal Place of Business:

481 NEWBURYPORT AVE
ALTAMONTE SPRINGS, FL 327013652 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 150597
ALTAMONTE SPRINGS, FL 327150597 US

New Mailing Address:

FEI Number: 59-2686261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARLOWE, MICHAEL L.
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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: SC ( ) Delete
Name: FLOWERS, JEFFERSON L, .
Address: 481 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRGS., FL

Title: PD ( ) Delete
Name: FLOWERS, JEFFERSON S, .
Address: 481 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRGS., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SC (X) Change ( ) Addition
Name: FLOWERS, JEFFERSON L, .
Address: 481 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRGS., FL 32701 US

Title: PD (X) Change ( ) Addition
Name: FLOWERS, JEFFERSON S, .
Address: 481 NEWBURYPORT AVENUE
City-St-Zip: ALTAMONTE SPRGS., FL 32701 US

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: JEFFERSON S FLOWERS PD 01/31/2008

Electronic Signature of Signing Officer or Director — Date