

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J55586

FILED
Mar 19, 2009
Secretary of State

Entity Name: GARDEL NATURAL FLORALS, INC.

Current Principal Place of Business:

264 ROUND LAKE PL
PALATKA, FL 32177 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 247
PALATKA, FL 32178 US

New Mailing Address:

FEI Number: 59-2777279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARRIS, MARY H.
264 ROUND LAKE RD
PALATKA, FL 32177 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: GARRIS, EDWARD WALTE, R
Address: 264 ROUND LAKE RD
City-St-Zip: PALATKA, FL 32177

Title: PD () Delete
Name: GARRIS, MARY H.,
Address: 264 ROUND LAKE RD
City-St-Zip: PALATKA, FL 32177

Title: VDT () Delete
Name: GARRIS, THOMAS C
Address: 2024 S AIA P.O. BOX 2182
City-St-Zip: FLAGLER BCH, FL 32136

Title: VD () Delete
Name: GARRIS, EDWARD W., I, II
Address: 8810 FISHERMAN'S BAY DR.
City-St-Zip: SARASOTA, FL 34231

Title: VD () Delete
Name: GARRIS, GREGORY S
Address: PENIEL RD RT 3 BOX 2490
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 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: MARY H. GARRIS

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date