## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64635

Entity Name: BRICK CITY FLOWERS, INCORPORATED

FILED Feb 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2724 NE 14TH ST OCALA, FL 34470860 US

Current Mailing Address: New Mailing Address:

2724 NE 14TH ST
OCALA, FL 326704860 US
2724 NE 14TH ST
OCALA, FL 34470 US

FEI Number: 59-2798877 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 STROUD, JAMES LEE
 STROUD, JAMES L

 1429 NE 25TH AVE.
 3980 NE 28 COURT

 OCALA, FL 32670 US
 OCALA, FL 34470 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: JAMES L. STROUD 02/02/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete Title: PVD (X) Change ( ) Addition

 Name:
 STROUD, JAMES LEE,
 Name:
 STROUD, JAMES LEE,

 Address:
 3980 NE 28TH COURT
 Address:
 3980 NE 28TH COURT

 City-St-Zip:
 OCALA, FL
 34479

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 SLEETH, JOAN,
 Name:
 SLEETH, JOAN,

 Address:
 1015 NE 8 AVE
 Address:
 1015 NE 8 AVE

 City-St-Zip:
 OCALA, FL
 34470

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JOHNSON, EDITH,
 Name:

 Address:
 1813 RIDGE ROAD
 Address:

 City-St-Zip:
 MOCKSVILLE, NC 27028
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES L. STROUD PRES 02/02/2005