

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J64635

FILED
Apr 29, 2009
Secretary of State

Entity Name: BRICK CITY FLOWERS, INCORPORATED

Current Principal Place of Business:

2724 NE 14TH ST
OCALA, FL 34470860 US

New Principal Place of Business:

Current Mailing Address:

2724 NE 14TH ST
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-2798877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROUD, JAMES L
3980 NE 28 COURT
OCALA, FL 34479 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: PVD () Delete
Name: STROUD, JAMES LEE
Address: 3980 NE 28TH COURT
City-St-Zip: OCALA, FL 34479

Title: D () Delete
Name: SLEETH, JOAN
Address: 1015 NE 8 AVE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: JOHNSON, EDITH
Address: 1813 RIDGE ROAD
City-St-Zip: MOCKSVILLE, NC 27028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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: JAMES STROUD

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date