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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J82747 1. Corporation Name

LIGHTNER'S FLOWERS & PLANTS OF WINTER HAVEN, INC

Principal Place	e of Business	Mailing Address						
1503 SIXTH ST., S.E. 24		1503 SIXTH ST., S.E. 24						
WINTER HAVEN FL 33880		WINTER HAVEN FL 33880		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifer 07/14/1987	j		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21		26		59-2819199		-N	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional	
22		27			5. Certificate of Status Desired	Ш	Fee R	equired
City & State		City & State		6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution	'	Added	to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the cu	rrent year In		
24	25	29 3	0		Personal Property Tax.		Yes	₽ No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New	Registered	Agent	
340 IF	COLO DIOLIADO A		81	1 Name	•			
WHEELIS, RICHARD A. 1503 SIXTH ST., S.E.			. 82	2 Street Ad	dress (P.O. Box Number is Not Accep	table)		
					e brighten set why conserved		<u> </u>	3011.4
WIN	TER HAVEN FL 33880		83	3			指領別	
			84	4 City		FI	85 Zip	Code
***		1007 (500 El :1, 01-1, 1-1	45 - 45 -		maratian aubmits this statement for th		f changing its	e registered
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligation.	of Florida. Such change was aut	horized b	y the corpora	rporation submits this statement for thation's board of directors. I hereby acc	ept the appo	intment as r	egistered
SIGNATURE								
		A A KAI- W	ametered An	net eveneture recui	ired when remetation)	DATE		
	Signature, typed or printed name of registered age			ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO O	DATE FFICERS A	ND DIRECT	ORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.