

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069262

Entity Name: KANNER FLORIST, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

6406 SE FEDERAL HWY
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

2174 SW MAINSAIL TERRRACE
STUART, FL 34997 US

New Mailing Address:

6406 SE FEDERAL HWY
STUART, FL 34997 US

FEI Number: 20-3143555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOIS, MARSHALL M
2174 SW MAINSAIL TERRRACE
STUART, FL 34997 US

Name and Address of New Registered Agent:

DUBOIS, ELIZABETH A
3797 SE BIG BEND TERRACE
HOBE SOUND, FL 33455 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: ELIZABETH A DUBOIS

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DUBOIS, MARSHALL M
Address: 2174 SW MAINSAIL TERRRACE
City-St-Zip: STUART, FL 34997 US

Title: MGRM (X) Delete
Name: DUBOIS, ELIZABETH A
Address: 2174 SW MAINSAIL TERRRACE
City-St-Zip: STUART, FL 34997 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DUBOIS, ELIZABETH A
Address: 3797 SE BIG BEND TERRACE
City-St-Zip: HOBE SOUND, FL 33455 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ELIZABETH A DUBOIS

MGRM

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date