

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000005737

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** A FLORAL BOUQUET AND GIFT BASKETS, LLC

**Current Principal Place of Business:**

516 NW 23RD AVENUE  
GAINESVILLE, FL 32609 AL

**New Principal Place of Business:**

**Current Mailing Address:**

516 NW 23RD AVENUE  
GAINESVILLE, FL 32609 AL

**New Mailing Address:**

FEI Number: 77-0700466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SORLI, DONALD SR.  
351 NW 249TH STREET  
NEWBERRY, FL 32669 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SORLI, MARIA L  
Address: 351 NW 249TH STREET  
City-St-Zip: NEWBERRY, FL 32669 AL

Title: MGRM  
Name: SORLI, DONALD SR.  
Address: 351 NW 249TH STREET  
City-St-Zip: NEWBERRY, FL 32669 AL

I hereby 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: DONALD SORLI

MGR

01/09/2012

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