

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000055880

**FILED**  
**Feb 25, 2012**  
**Secretary of State**

**Entity Name:** METRO FLORAL SUPPLIES, LLC

**Current Principal Place of Business:**

15215 COLLIER BLVD  
SUITE 319  
NAPLES, FL 34119

**New Principal Place of Business:**

15215 COLLIER BLVD  
SUITE 309  
NAPLES, FL 34119

**Current Mailing Address:**

1012 CHESAPEAKE BAY COURT  
NAPLES, FL 34120

**New Mailing Address:**

FEI Number: 27-4546480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DDL ENTERPRISES OF SOUTHWEST FL, LLC  
15215 COLLIER BLVD  
UNIT 319  
NAPLES, FL 34119 US

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

DDL ENTERPRISES OF SOUTHWEST FL, LLC  
15215 COLLIER BLVD  
UNIT 309  
NAPLES, FL 34119 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/25/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CUMMINGS, JENNIFER J  
Address: 1012 CHESAPEAKE BAY COURT  
City-St-Zip: NAPLES, FL 34120

Title: MGRM  
Name: CUMMINGS, KISMET F  
Address: 1012 CHESAPEAKE BAY COURT  
City-St-Zip: NAPLES, FL 34120

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: KISMET F. CUMMINGS

MGRM

02/25/2012

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