2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2012
Secretary of State

DOCUMENT# L11000113653

Entity Name: LAKE CITY FLORIST L.L.C.

Current Principal Place of Business:

796 W DUVAL STREET
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

796 W DUVAL STREET
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 45-3459760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, CATHRIN J
377 NW LONA LOOP
LAKE CITY, FL 32055 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: SMITH, CATHRIN J
Address: 377 NW LONA LOOP
City-St-Zip: LAKE CITY, FL 32055

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 Statues.

SIGNATURE: CATHRIN SMITH MGRM 03/27/2012

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