

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

'95 JUN 30 AM 9:47

DOCUMENT # L12916

(7)

1. Corporation Name

BEV'S DOWNTOWN FLORIST, INC.

Principal Place of Business

DAVID W. WILCOX, ESQ.
308 13TH STREET WEST
BRADENTON FL 34205

Mailing Address

DAVID W. WILCOX, ESQ.
308 13TH STREET WEST
BRADENTON FL 34205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/29/1989

3a. Date of Last Report

04/28/1994

4. FEI Number

58-2971018

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for enterprise tax under F.S. 109.019
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 528 12th St. W.

2a. Mailing Address

26

State, Apt. #, etc.

State, Apt. #, etc.

22 City & State

23 BRADENTON FL

27 City & State

28

24 Zip

25 34205

Country

26 USA

29 Zip

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILCOX, DAVID W.
308 13TH STREET WEST
BRADENTON FL 34205

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature) (Typed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

(Date)

12. OFFICERS AND DIRECTORS

1. TITLE PD
2. NAME KLOPP, RONALD P.
3. STREET ADDRESS 528 12TH ST WEST
4. CITY, ST, ZIP BRADENTON FL

1. TITLE ST
2. NAME KLOPP, RHONDA E.
3. STREET ADDRESS 528 12TH ST WEST
4. CITY, ST, ZIP BRADENTON FL

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PDST
1.2 NAME JOANNE GUSTAVSEN
1.3 STREET ADDRESS 528 12th Street West
1.4 CITY, ST, ZIP Bradenton, FL 34205

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(1)(b), 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.

SIGNATURE:

JOANNE GUSTAVSEN

JOANNE GUSTAVSEN

6/26-95

746-6090

(Signature and Typed or Printed Name of Signing Officer or Director)

Date

Display Phone #