

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90165 025 ****61.25

DOCUMENT # N44541

1. Entity Name

WEST COAST FLORIST ASSOCIATION OF FLORIDA, INC.



Principal Place of Business

**5904 7TH ST.
ZEPHYRHILLS FL ~~33540~~**

Mailing Address

**P.O. BOX 2112
ZEPHYRHILLS FL 33539
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

33542

4. FEI Number **59-3131086**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEIGHTON, RICHARD L

**5904 7TH ST
ZEPHYRHILLS FL ~~33540~~ 33542**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Richard Deighton **RICHARD DEIGHTON**

01/30/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
AYRES, SHERI
8045 NORWICH DR
PORT RICHEY FL 34668** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**6152 RIDGE RD
PORT RICHEY, FL 34668** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
PROVONSHA, PATRICK
6416 GEORGIA AVE
BRADENTON FL 34207** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
NANCY CUSAMANO
7520 VIENNA LANE
PORT RICHEY, FL 34668** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
DEIGHTON, RICHARD
5904 7TH ST
ZEPHYRHILLS FL 33540** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ZEPHYRHILLS, FL 33542 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
CVSAMANO, NANCY
8047 MITCHELL BLVD
NEW PORT RICHEY FL 34655** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SHARON LOWRY (DS)
2509 W BUSCH BWP** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard Deighton **RICHARD DEIGHTON** **01/30/03** **813-782-1106**

SIGNATURE AND TYPED OR PRINTED NAME OF FORMING OFFICER OR DIRECTOR

CR2E037 (10/02)