

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001039

Entity Name: WALLFLOWERS DESIGN CENTER, INC.

FILED  
May 04, 2009  
Secretary of State

## Current Principal Place of Business:

460 NORTH RONALD REAGAN BLVD  
SUITE 100  
LONGWOOD, FL 32750

## Current Mailing Address:

460 NORTH RONALD REAGAN BLVD  
SUITE 100  
LONGWOOD, FL 32750

## New Principal Place of Business:

1015 S. SEMORAN BLVD  
SUITE 105  
CASSELBERRY, FL 32707

## New Mailing Address:

1015 S. SEMORAN BLVD  
SUITE 105  
CASSELBERRY, FL 32707

FEI Number: 59-3709238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GLAVIN, GRACE A  
1340 TUSCAWILLA ROAD STE 106  
WINTER SPRINGS, FL 32708 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CONOCHALLA, CATHY  
Address: 215 CHESTNUT RIDGE STREET  
City-St-Zip: WINTER SPRINGS, FL 327084343

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CONOCHALLA, CATHY  
Address: 215 CHESTNUT RIDGE STREET  
City-St-Zip: WINTER SPRINGS, FL 327084343

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHY E. CONOCHALLA

D

05/04/2009

Electronic Signature of Signing Officer or Director

Date