2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 24, 2002 8:00 am P01000101720 Secrétary of State DOCUMENT # 1. Entity Name 07-24-2002 90142 043 ***150.00 FERNWOOD FLOWERS & GIFTS, INC. Mailing Address Principal Place of Business 620 N MAIN ST P O BOX 1249 CHIEFLAND FL 32626 CHIEFLAND FL 32626 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ADAMS, JENNIÈ F Street Address (P.O. Box Number is Not Acceptable) 550 N COURT ST **BRONSON FL 32621** Zin Code City 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE'IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME ADAMS, JENNIE F P O BOX 691 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRONSON FL 32621** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME BURKETT, KIMBERLY A NAME STREET ADDRESS STREET ADDRESS P O BOX 915 CITY-ST-7IP CITY-ST-ZIP TRENTON FL 32693 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY:ST:7IP Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TIT! F TITLE

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an atta-

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

971207 5vz.# \$01000101720 Fernwood Flowers & Gifts. Inc. P.O. Box 1249 Chiefland, FL 32644 (352)490-5331 Doc # P0/000101720 FE1# 59-3746797 July 22, 2002 Dursion of Carparations Uniform Business Report Filings Attr: Re-instatement Section P.O. Bal 1500 Tallahasses \$ 32302-1500 Gentlemen! Exclosed se our 2002 thusarm Business Keparto The are a men ausiness that just appeal on march 2 of this year. The just learned there forms are mailed acet y Jakuary Lawever, this is the first one we have received the be to one of your replece on the place and replaced this; Le adoysed me to write the lette of explanation and send the \$150.00 that is usually required Quel check in that amount is enclosed # 1229). Shark ejan far your Kelp.