

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020564

FILED  
Mar 08, 2010  
Secretary of State

**Entity Name:** MONTICELLO FLORIST AND GIFTS, INC.

**Current Principal Place of Business:**

230 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

230 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344

**New Mailing Address:**

FEI Number: 54-2096708

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ASHBURN, REBECCA J OWNER  
230 NORTH JEFFERSON STREET  
MONTICELLO, FL 32344 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ASHBURN, REBECCA J OWNER  
Address: 230 NORTH JEFFERSON STREET  
City-St-Zip: MONTICELLO, FL 32344

Title: O  
Name: ASHBURN, ROBERT S O  
Address: 230 N JEFFERSON  
City-St-Zip: MONTICELLO, FL 32344

Title: O  
Name: MCDANIELS, BARBARA L O  
Address: 230 N JEFFERSON  
City-St-Zip: MONTICELLO, FL 32344

I hereby 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 all other like empowered.

SIGNATURE: REBECCA J ASHBURN

D

03/08/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date