

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000066846

FILED
Mar 16, 2007
Secretary of State

Entity Name: FLAMINGO FOLIAGE OF FLORIDA, INC.

Current Principal Place of Business:

1429 NORTH J TERRACE
LAKE WORTH, FL 33460

New Principal Place of Business:

P.O. BOX 6949
WEST PALM BEACH, FL 33405

Current Mailing Address:

1429 NORTH J TERRACE
LAKE WORTH, FL 33460

New Mailing Address:

P.O. BOX 6949
WEST PALM BEACH, FL 33405

FEI Number: 56-2370189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARR, NANCY E
1429 NORTH J TERRACE
LAKE WORTH, FL 33460 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: PRES () Delete
Name: STARR, NANCY E PRESIDE
Address: 1429 NORTH
City-St-Zip: LAKE WORTH, FL 33460 PB

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STARR, NANCY E PRESIDE
Address: P.O. BOX 6949
City-St-Zip: WEST PALM BEACH, FL 33405 PB

I hereby certify that the information supplied with this filing does not qualify for the 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: NANCY STARR

PRES

03/16/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date