2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # P03000125180

1. Entity Name

JOHNSON'S WHOLESALE FLOWERS, INC



## FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 90737 019 \*\*\*150.00

				COO WE THE			
Principal Place of Business Mailing Address					7		
3291 SW RUCKS DAIRY RD.		3291 SW RUCKS DAIRY RD.			1		
OKEECHOBEE FL 34974		OKEECHOBEE FL 34974					
2 Principal F	Place of Business	3. Mailing Address	••••	<u> </u>			
2. Thiopart ago of Basilioto		J. Maining Modroso					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E034 (11/03)		
					WIGGIAE GIAZEBOA	.1 1/00/	
City & State		City & State		4. FEI Number	h	plied For	
7:					16-1687978		t Applicable
Zip	Country Zip		Country			8.75 Add	
6. Name and Address of Current		egistered Agent			7. Name and Address of New Registered Agent		
C. Halle and Address of Cartell Hoggstelet Agent				Name			
JOHNSON, WYNETH			_				
3291 SW RUCKS DAIRY RD.				Street Address (P.O. Box Number is Not Acceptable)			
OKEECHOBEE FL 34974							
	—		<u> </u>	Oib.		T 7:- 0-4	
				City	FL	Zip Code	•
		or the purpose of changing it	s registered	office or registe	ered agent, or both, in the State of Florida. Lam fai	miliar with,	and accept
the obligation	tions of registered agent.						
SIGNATURE							
	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered A	geni signature require	ed when reinstating) DATE		
F	ILE NOW!!! FEE IS \$150.00				2 Floring Committee Floring	05.0	
After May 1, 2004 Fee will be \$550.00					9. Election Campaign Financing Trust Fund Contribution.		May Be to Fees
Make Chec	k Payable to Florida Department o	f State					
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND D	PRECTORS	IN 11
TITLE	PRES	☐ Delete	TITLE			Change	☐ Addition
NAME STREET ADDRESS	JOHNSON, DANIEL D JR		NAME	ADDRESS			
STREET ADDRESS CITY-ST-ZIP	3291 SW RUCKS DAIRY RD. OKEECHOBEE FL 34974		CITY-ST	ADDRESS . 7IP			
	VP	☐ Delete	_			~	
TITLE NAME	JOHNSON, DANIEL D SR	LI Delete	TITLE NAME		· ·	Change	Addition .
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	OKEECHOBEE FL 34974		CITY-ST	1			
TITLE	SEC	☐ Delete	TITLE		1	∠ Change	Addition
NAME	JOHNSON, WYNETH		NAME			- •	_
STREET ADDRESS	3291 SW RUCKS DAIRY RD.			ADDRESS			1
CITY-ST-ZIP	OKEECHOBEE FL 34974		CITY-ST	- ZIP			
TITLE	TRE	☐ Delete	TITLE	1	Ţ	Change	☐ Addition
NAME	JOHNSON, WYNETH		NAME				
STREET ADDRESS	3291 SW RUCKS DAIRY RD. OKEECHOBEE FL 34974		STREET :	ADDRESS			4
CITY-ST-ZIP	OKECHOBEE FL 34974			-2IP		<del></del>	
TITLE		☐ Delete	TITLE		Į	Change	☐ Addition
NAME STREET ADDRESS			NAME STREET	ADDRESS			}
CITY-ST-ZIP	• -		CITY-ST	Ę			į
		☐ Delete	TITLE	-		Change	Addition
TITLE NAME		L Delete	NAME	1	L	— numinAg	L AGURBON
STREET ADDRESS				ADDRESS		*	
CITY-ST-ZIP			CITY-ST	l l			

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 607, 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.