

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136491

FILED
Feb 10, 2009
Secretary of State

Entity Name: THE TEA PLANTATION & FLORAL BOUTIQUE, INC.

Current Principal Place of Business:

1101 CANAL STREET
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

1101 CANAL STREET
THE VILLAGES, FL 32162

New Mailing Address:

FEI Number: 16-1693295 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SUMMERFIELD, JOHN
1101 CANAL ST
THE VILLAGES, FL 32162 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: S () Delete
Name: WHITEHEAD, MARIAN
Address: 1101 CANAL STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: V () Delete
Name: WHITEHEAD, ROY
Address: 1101 CANAL STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: P () Delete
Name: SUMMERFIELD, JANICE
Address: 1101 CANAL ST.
City-St-Zip: THE VILLAGES, FL 32162

Title: T () Delete
Name: SUMMERFIELD, JOHN
Address: 1101 CANAL ST.
City-St-Zip: THE VILLAGES, FL 32162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: WHITEHEAD, MARIAN
Address: 1101 CANAL STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: VP (X) Change () Addition
Name: WHITEHEAD, ROY
Address: 1101 CANAL STREET
City-St-Zip: THE VILLAGES, FL 32162

Title: PRES (X) Change () Addition
Name: SUMMERFIELD, JANICE
Address: 1101 CANAL ST.
City-St-Zip: THE VILLAGES, FL 32162

Title: TREA (X) Change () Addition
Name: SUMMERFIELD, JOHN
Address: 1101 CANAL ST.
City-St-Zip: THE VILLAGES, FL 32162

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: JOHN SUMMERFIELD

Electronic Signature of Signing Officer or Director

TREA

02/10/2009

_____ Date