

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000142202

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** FLOWERS AND ARRANGEMENTS BY DESUE INC.

**Current Principal Place of Business:**

3124 PEARL STREET  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

590 QUEENS HARBOR DRIVE  
JACKSONVILLE, FL 32225

**New Mailing Address:**

**FEI Number:** 20-3676798

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GERALD P. JONES, CPA,PA  
2039 SOUTEL DRIVE  
JACKSONVILLE, FL 32208 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

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: SPENCER, CHARLES  
Address: 590 QUEENS HARBOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: V,D  
Name: DESUE, GERALD  
Address: 1032 A. PHILLIP RANDOLPH  
City-St-Zip: JACKSONVILLE, FL 32206

Title: TS D  
Name: SPENCER, ELAINE  
Address: 590 QUEENS HARBOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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: CHARLES SPENCER

PD

04/30/2012

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

\_\_\_\_\_  
Date