

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000111390

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** NAVARRE BEACH FLOWERS, INC.

**Current Principal Place of Business:**

8486 NAVARRE PARKWAY  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

**Current Mailing Address:**

8486 NAVARRE PARKWAY  
NAVARRE, FL 32566 US

**New Mailing Address:**

**FEI Number:** 26-3968362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAPPELLA, CECELIA A OWNER  
6483 SURFSIDE COVE  
GULF BREEZE, FL 32563 US

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

HAMERLINCK, JOANNE E OWNER  
8668 NAVARRE PKWY  
#325  
NAVARRE, FL 32566 US

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:** JOANNE E. HAMERLINCK

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** HAMERLINCK, JOANNE E  
**Address:** 8668 NAVARRE PKWY #325  
**City-St-Zip:** NAVARRE, FL 32566 US

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:** JOANNE E. HAMERLINCK

PRES

04/24/2012

Electronic Signature of Signing Officer or Director

Date