FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

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STREET ADORESS

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CITY-ST-ZIP

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

POCUMENT # P9300006756 (9)

THE FLOWER SHOP OF OKALOOSA COUNTY, INC.

Principal Place of Business Mailing Address 415 GREEN ACRES RD 507 CIRCLE DRIVE, NW FT. WALTON BEACH FL 32547 507 CIRCLE DR. NW FT. WALTON BEACH FL 32548 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3165980 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DAVIS, EDWINA J A1 507 CIRCLE DRIVE NW 82 Street Address (P.O. Box Number is Not Acceptable) FORT WALTON BEACH FL 32548 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE T DETETE Change 1.11016 Addition RITCHIE, PATRICIA J NAME 12 NAME 415 GREEN ACRES RD. STREET ADDRESS 13 STREET ADDRESS FORT WALTON BEACH FL 32547 CITY-SI-78 1.4 D/TY - ST - ZIF DELFTE Change TITLE 21 THE Addition DAVIS, EDWINA J NAME 2.2 NAM6 415 GREEN ACRES RD. STREET ADDRESS 2.3 STREET ADDRESS FORT WALTON BEACH FL 32547 CITY-ST-ZIP 2.4 C(1Y+S1+2(P DELETE

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 annual report or supplemental annual 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 composition or the receiver or trustee gupowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is chapter on an attachment with an other section.

3.1 11111

3.2 NAME

4.1 TITLE

4 2 NAME

5 1 TITLE

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6.1 TITLE

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3.3 STREET ADDRESS

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5.4 CITY - ST - 2(P

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3.4. CHY-ST-ZIP

Change

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Addition

Addition

Addition

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FILED

Apr 21 1998 8:00am

Secretary of State