


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P93000016802 1. Entity Name APOLLO BEACH FLOWERS, INC.	
--	---

Principal Place of Business 228 APOLLO BEACH BLVD APOLLO BEACH, FL 33572	Mailing Address 228 APOLLO BEACH BLVD APOLLO BEACH, FL 33572
--	--

DO NOT WRITE IN THIS SPACE



02202008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3176939	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CROSBY, FREDERICK L
704 18TH AVENUE SE
RUSKIN, FL 33570

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000939844 03/06/08-80024-016 150.00
---	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CROSBY, FREDERICK L JR 704 18TH AVENUE SE RUSKIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CROSBY, JANICE L 704 18TH AVENUE SE RUSKIN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALKER, DEANA P.O. BOX 433 RUSKIN, FL 33575
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: FREDERICK L. CROSBY JR. 2-20-2008 813.645-0001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #