2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000061618

Entity Name: JOSEY'S POSEYS FLORIST, INCORPORATED

FILED Apr 04, 2006 Secretary of State

Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:			
	ATEE AVENUE ON, FL 34209	WEST					
Current Ma	ailing Address	:	New Maili	New Mailing Address:			
	ATEE AVENUE ON, FL 34209	WEST					
FEI Number:	65-0529810	FEI Number Applied For ()	FEI Number Not App	licable()	Certificate of Status Desired	()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of I	New Registered Agent:		
1101 9TH A	ROBERT H VENUE WEST ON, FL 34205	- US	6150 SR. 7 #311	SCHULTZ, ROBERT H 6150 SR. 70 EAST #311 BRADENTON, FL 34203 US			
The above in the State		ıbmits this statement for the pu	urpose of changing i	ts registered o	office or registered agent, or	both,	
SIGNATURE:				04/04/2006			
	Electronic	Signature of Registered Ager	nt		Date		
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip: Title:	JOSEY, LOUISE 4507 56TH ST. W BRADENTON, FL	/	Title: Name: Address: City-St-Zip: Title:	JOSEY, LOUIS 6517 HERITAG BRADENTON,	SE LANE		
Name: Address: City-St-Zip:	JOSEY, KEVIN J 5809 2 AVE WES BRADENTON, FL		Name: Address: City-St-Zip:				
Title: Name: Address: City-St-Zip:	S () E ALTENBERND, E 4507 56TH STRE BRADENTON, FL	ET WEST	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	V () D JOSEY, STEPHE 2907 62ND STRE BRADENTON, FL	EET WEST	Title: Name: Address: City-St-Zip:	() Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN J JOSEY T 04/04/2006