

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000043989

Entity Name: BETTY ANN FLORIST, INC.

FILED  
Sep 17, 2009  
Secretary of State

**Current Principal Place of Business:**

221 N. US 1  
FT. PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

221 N. US 1  
FT. PIERCE, FL 34950

**New Mailing Address:**

FEI Number: 65-0589234      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PURLEE, OPAL  
221 N. US 1  
FT. PIERCE, FL 34950      US

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

PURLEE, GRANT  
221 N. US 1  
FT. PIERCE, FL 34950      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: GRANT PURLEE

09/17/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: PURLEE, OPAL  
Address: 221 N. US 1  
City-St-Zip: FT. PIERCE, FL 34950

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: PURLEE, GRANT  
Address: 9665 ANGLE ROAD  
City-St-Zip: FT. PIERCE, FL 34945

Title: VP ( ) Change (X) Addition  
Name: PURLEE, DUSTY R  
Address: 9665 ANGLE ROAD  
City-St-Zip: FORT PIERCE, FL 34945

I hereby certify that the information supplied with this filing does not qualify 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: GRANT PURLEE

PST

09/17/2009

Electronic Signature of Signing Officer or Director

Date