

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000070753

FILED
Jun 29, 2005
Secretary of State

Entity Name: 50 FIFTY FLORAL ART, INC.

Current Principal Place of Business:

4646 DOMESTIC AVE6
104
NAPLES, FL 34104 US

New Principal Place of Business:

4646 DOMESTIC AVENUE
104
NAPLES, FL 34104 US

Current Mailing Address:

4646 DOMESTIC AVE
104
NAPLES, FL 4 US

New Mailing Address:

FEI Number: 59-3466759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANABARGER, EDWARD L
366 CENTRAL AVE
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

SHANABARGER, EDWARD L
1984 CLARK COURT
NAPLES, FL 34112 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: _____

Electronic Signature of Registered Agent

06/29/2005

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: P () Delete
Name: SHANABARGER, EDWARD L
Address: 1325 5TH ST S
City-St-Zip: NAPLES, FL 34102

Title: VP () Delete
Name: HUDDLESTON, MATTHEW
Address: 800 I MEADOWLANE DR
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHANABARGER, EDWARD L
Address: 1984 CLARK COURT
City-St-Zip: NAPLES, FL 34112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATTHEW HUDDLESTON

Electronic Signature of Signing Officer or Director

VP

06/29/2005

Date