

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050413

FILED
May 14, 2004
Secretary of State

Entity Name: NORTH FORT MYERS FLORIST, INC.

Current Principal Place of Business:

1890 N. TAMIAMI TRL
D-1
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

1890 N. TAMIAMI TRL
D-1
NORTH FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 65-0843054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUBIER, RUTH A
5245 BIG PINE WAY, SUITE 101
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

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

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: D () Delete
Name: SIZER, STEPHANIE J
Address: 18171 DURRANCE RD.
City-St-Zip: FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: STEPHANIE J SIZER

PRES

05/14/2004

Electronic Signature of Signing Officer or Director

Date