

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

10/2

PROFIT CORPORATION
1999
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB 27 AM 7:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S35374
1. Corporation Name
FLOWERS OF PINELLAS INC.

| | | | | | |
|---|--|--|--|---|--|
| Principal Place of Business P.O. Box 4187 SEMINOLE FL 33775-4187 USA | | Mailing Address P.O. Box 4187 SEMINOLE FL 33775-4187 USA | | DO NOT WRITE IN THIS SPACE | |
| 2. Principal Place of Business 21 P.O. Box 4187 Suite, Apt. #, etc. | | 2a. Mailing Address 26 P.O. Box 4187 Suite, Apt. #, etc. | | 3. Date Incorporated or Qualified 03/01/1991 | |
| 22 City & State 23 SEMINOLE FL Zip Country 24 33775-4187 USA | | 27 City & State 28 SEMINOLE FL Zip Country 29 33775-4187 USA | | 4. FEI Number 59-3070932 Applied For Not Applicable | |
| 9. Name and Address of Current Registered Agent BOYLE, JACK R. JR. 11725 81 PLACE N. SEMINOLE FL 33772 | | 10. Name and Address of New Registered Agent 81 Name JACK R. BOYLE JR. 82 Street Address (P.O. Box Number is Not Acceptable) 11725 81 PLACE N. 83 84 City SEMINOLE FL 85 Zip Code 33772 | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| SIGNATURE | | | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--------------------|---|-----------------------|
| TITLE | PST | 1.1 TITLE | |
| NAME | BOYLE, JACK R. JR. | 1.2 NAME | 800002445278--3 |
| STREET ADDRESS | 11725 81 PLACE N. | 1.3 STREET ADDRESS | -03/03/98--01045--002 |
| CITY-ST-ZIP | SEMINOLE FL 33772 | 1.4 CITY-ST-ZIP | ****315.00 ****315.00 |
| TITLE | | 2.1 TITLE | |
| NAME | | 2.2 NAME | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Jack R. Boyle Jr. President 2/23/98 545-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 10, 1998

FLOWERS OF PINELLAS, INC.
P O BOX 4187
SEMINOLE, FL 34642-1187 US

SUBJECT: FLOWERS OF PINELLAS, INC.
Ref. Number: S35374

Thank you for your letter dated January 29, 1998 which has been forwarded to me for response. The 1997 annual report the corporation mailed to this office was never received. Please fill out the enclosed 1998 annual report form and return it with a check for \$315.00. This fee covers \$165.00 for 1997 and \$150.00 for 1998. To avoid paying a reinstatement fee, please return your document, check and a copy of this letter within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Trevor Brumbley
Document Specialist

Letter Number: 798A00007608