

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L38462

Entity Name: FIELD OF FLOWERS, INC.**Current Principal Place of Business:**5123 S. UNIVERSITY DRIVE
DAVIE, FL 33328**Current Mailing Address:**5123 S. UNIVERSITY DRIVE
DAVIE, FL 33328 US**FEI Number:** 65-0180887**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLIPSE, DONN F
2960 SOLANO AVE
202
COOPER CITY, FL 33024 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_____
Date**Officer/Director Detail :**

Title	CEO
Name	FLIPSE, DONN F
Address	2960 SOLANO AVE 202
City-State-Zip:	COOPER CITY FL 33024

Title	ST
Name	FLIPSE, DONN K
Address	2025 SECOFFEE STREET
City-State-Zip:	CORAL GABLES FL 33133

I hereby 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 all other like empowered.

SIGNATURE: DONN FLIPSE

CHAIRMAN AND CFO

01/31/2023

Electronic Signature of Signing Officer/Director Detail_____
Date