## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000017738

Entity Name: ALL CITY FLORIST, INC.

**Current Principal Place of Business:** 

316 W. NEW HAVEN AVENUE MELBOURNE. FL 32901

**Current Mailing Address:** 

316 W. NEW HAVEN AVENUE MELBOURNE, FL 32901

FEI Number: 59-3362587 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PUZYCKI, SUSAN M 316 W. NEW HAVEN AVENUE MELBOURNE, FL 32901 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

FILED Apr 11, 2015

**Secretary of State** 

CC7181970353

Officer/Director Detail:

Title D Title

Name PUZYCKI, SUSAN MPRES. Name HIGGINBOTHAM, PAMELA YSECT.

Address 511 EDWARDS ROAD Address 280 SILVER OAK ROAD, NE

City-State-Zip: W. MELBOURNE FL 32904 City-State-Zip: PALM BAY FL 32907

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: PAMELA HIGGINBOTHAM

SECT.

04/11/2015

Electronic Signature of Signing Officer/Director Detail

Date