

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S99485

**Entity Name:** THE FLOWER CENTRE OF ST. PETERSBURG, INC.

**Current Principal Place of Business:**

2500 DR M.L. KING ST  
SAINT PETERSBURG, FL 33704

**Current Mailing Address:**

2500 DR M.L. KING ST  
SAINT PETERSBURG, FL 33704

**FEI Number:** 59-3099193

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SLICK, JOSEPH L  
THE FLOWER CENTRE  
2500 DR. M.L. KING ST. N.  
ST PETERSBURG, FL 33704 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           | P                           | Title           | VST                         |
| Name            | SIMONEAU, WILFRED J         | Name            | SLICK, JOSEPH L             |
| Address         | 8410 17TH WAY NORTH         | Address         | 8410 17TH WAY NORTH         |
| City-State-Zip: | ST PETERSBURG FL 33702-2857 | City-State-Zip: | ST PETERSBURG FL 33702-2857 |

*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:** WILFRED J. SIMONEAU

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04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date