2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# 709710

Entity Name: THE FLORIDA ENTOMOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

16125 E LAKE BURRELL
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1007
LUTZ, FL 33548 US

New Mailing Address:

FEI Number: 59-6546670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DUCHENE, TERESA
16125 E LAKE BURRELL AVE
LUTZ, FL 33549 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DUCHENE, TERESA
Address: 16125 E LAKE BURRELL DR
City-St-Zip: LUTZ, FL

Title: PD ( ) Delete
Name: FRANK, J HOWARD
Address: P O BOX 110620
City-St-Zip: GAINESVILLE, FL 32611

Title: PD ( ) Delete
Name: MANKIN, RICHARD
Address: 1700 SW 23RD DR
City-St-Zip: GAINESVILLE, FL 32608

Title: VPD (X) Delete
Name: LAPAINTE, STEPHEN L
Address: 2001 SOUTH ROCK ROAD
City-St-Zip: FT PIERCE, FL 34945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change ( ) Addition
Name: STEPHEN, LAPOINTE
Address: 2001 SOUTH ROCK RD
City-St-Zip: FT PIERCE, FL 34945

Title: VP (X) Change ( ) Addition
Name: MANKIN, RICHARD
Address: 1700 SW 23RD DR
City-St-Zip: GAINESVILLE, FL 32608

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA J DUCHENE D 04/27/2005

Electronic Signature of Signing Officer or Director — Date