2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2012
Secretary of State

DOCUMENT# 760472

Entity Name: FLORIDA NURSERY, GROWERS & LANDSCAPE ASSOCIATION-PAC, INC.

Current Principal Place of Business:

1533 PARK CENTER DR
ORLANDO, FL 328355705 US

New Principal Place of Business:

Current Mailing Address:

1533 PARK CENTER DR
ORLANDO, FL 328355705 US

New Mailing Address:

FEI Number: 59-2128776 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOLUSKY, BENJAMIN C MR.
1533 PARK CENTER DR
ORLANDO, FL 32835 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: C
Name: GARRISON, RALPH MR.
Address: 1533 PARK CTR DR
City-St-Zip: ORLANDO, FL 32835

Title: D
Name: MAHR, CAROLAN MS.
Address: 1533 PK CNTR DR
City-St-Zip: ORLANDO, FL 32835

Title: D
Name: HACKNEY, GEORGE MR.
Address: R #4 BOC 211
City-St-Zip: QUINCY, FL 32351

Title: D
Name: MUELLER, RUSSELL MR.
Address: 1705 E E WILLIAMSON RAOD
City-St-Zip: LONGWOOD, FL

Title: T
Name: FORD, PATRICK J MR.
Address: 1533 PARK CTR DR
City-St-Zip: ORLANDO, FL 32835

Title: VC
Name: POLOMSKY, PAUL MR.
Address: 1533 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835

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

SIGNATURE: EDDIE SINGH CFO 02/20/2012

Electronic Signature of Signing Officer or Director Date