

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90050 004 ****61.25

DOCUMENT # 761104

1. Entity Name
TREE PAC, INC.



Principal Place of Business
**C/ FLORIDA FORESTRY ASSOCIATION
402 E. JEFFERSON STREET, P.O. BOX 1696
TALLAHASSEE FL 32302**

Mailing Address
**C/ FLORIDA FORESTRY ASSOCIATION
402 E. JEFFERSON STREET, P.O. BOX 1696
TALLAHASSEE FL 32302**

60025047



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2141178**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DORAN, JEFF
402 EAST JEFFERSON
TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Delete
NAME **VOGEL, JOHN T.**
STREET ADDRESS **EAST DARBY ROAD**
CITY-ST-ZIP **SAN ANTONIO FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Mike Branch**
STREET ADDRESS **P.O. Box 457**
CITY-ST-ZIP **Fernandina Beach, FL 32035-0457**

TITLE **STD** ☐ Delete
NAME **COOK, WILLIAM K.**
STREET ADDRESS **RT. 1 BOX 1675**
CITY-ST-ZIP **CALLAHAN FL**

TITLE **D** ☐ Change ☒ Addition
NAME **CHARLES THOMPSON**
STREET ADDRESS **4321 NW 19th Avenue**
CITY-ST-ZIP **Gainesville, FL 32605**

TITLE **D** ☐ Delete
NAME **STOKES, HAROLD**
STREET ADDRESS **RT. 1, BOX 666**
CITY-ST-ZIP **BRYCEVILLE FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Kelley Smith, Jr.**
STREET ADDRESS **P.O. Box 75**
CITY-ST-ZIP **Bestwick, FL 32007-0075**

TITLE **D** ☐ Delete
NAME **PRITCHETT, MARVIN**
STREET ADDRESS **1050 SE 6TH ST.**
CITY-ST-ZIP **LAKE BUTLER FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **VAN LOOCK, HARRY, J**
STREET ADDRESS **RT. 3, BOX 260**
CITY-ST-ZIP **PERRY FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **COOK, BOB**
STREET ADDRESS **P.O. BOX 2249**
CITY-ST-ZIP **LAKE CITY FL 32056**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Robert P. Cook**
SIGNATURE REQUIRED President

4/28/03

850.222.5646

CR2E037 (10/02)