FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N15068

(2)

FLORIDA NATIVE PLANT SOCIETY, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			- -	 	JI BUBUI DYOFI	0 9 0 0 60
P.O. BOX 6116 SPRINGHILL FL 34606		P.O. BOX 6116 SPRINGHILL FL 34611-0906 US							
U\$		00				3. Date Incorporated or Qualified 05/22/1986		le of Last (03/04/1	
2. Principal Pi 21	lace of Business	2a. Mailing Address 26				4. FEI Number 59-2676375	Applied For Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	6	City & State				6. Election Campaign Financing \$5,00 May Be 1 rust Fund Contribution Added to Fees			
23 Zip	Country	Zip Country				8. This corporation has liability for i			
24	25 29 30		30	<u> </u>		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Registered Agent		1 N	lame	10. Name and Address of New He	gisterea A	.gent	
			ľ	FIN	iame				
MICHAEL W. MINGEA			82 Street Add			ss (P.O. Box Number is Not Acceptab	le)		
	KLER RD. FL 32765		8	3				••••	
OVIEDO	FL 32/03		8	4 C	City			85 Zip	Code
					•		FL		
I office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	of Florida. Such change was	authorized	by the	amed corpo e corporatio	oration submits this statement for the p on's board of directors. I hereby accep	urpose of at the appo	changing sintment a	its registered s registered
agent. i a	m familiar with, and accept the obliga	tions of, Section 617.0503, F	lorida Statut	es.					
SIGNATURE .	Signature, typed or printed name of registered agen	and title if applicable (NO	TE: Registered A	agent si	gnature require	d when reinstating)	DATE		
12. OFFICERS AND DIRECTORS				13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 TITLE					☐ Change	☐ Addition
NAME	PAIS, DAVID		1.2 NAM	E	j				
STREET ADDRESS	2306 NW 47TH TERR		1.3 STRE	E1 ADD	RESS				
CITY-ST-ZIP	GAINESVILLE FL		1.4 CITY	- \$1-21	P				114000
TITLE	SD	☐ DELETE	2.1 11116					☐ Change	☐ Addition
NAME	BUTTS, DEBBIE		2.2 NAM						
STREET ADDRESS	4321 NEEDLE PALM ROAD		2.3 S1RE						
CITY-ST-ZIP	PLANT CITY FL VD	DELETE	2, 4 CITY 3.1 TITLE					Change	Addition
TITLE NAME	BRODA, JANICE		3.2 NAM		TA	NICE BROPA 335 FRANCIPAN FRO BCH , FL			
STREET ADDRESS	9335 FRANGIPANI DRIVE		3.3 STRE		DRESS 7.3	335 FRANCIPAN	De	1100	ĺ
CITY-ST-ZIP	VERO BCH FL			3.4. CITY-ST-ZIP		FRO BCH, FL			
TITLE	TD	DELETE	4.1 TITLE					Change	Addition
NAME	WELLER, CANDACE		4. 2 NAN	ME					
STREET ADDRESS	1515 COUNTRY CLUB RD N.		4.3 STRE	E1 ADC	ORESS				
CITY-ST-ZIP	ST. PETERSBURG FL		4.4 C(1)	- \$1 · ZI	IP.			_ :-	
TITLE	VD .	☐ DELETE	5.1 TITLE	5.1 TITLE				☐ Change	Addition
NAME	ZARILLO, KIM		5.2 NAM						
STREET ADDRESS	760 CAJEPUT CIRCLE		5.3 STRE						
CfTY-ST-ZIP	MELBOURNE VILLAGE FL	DELETE	5.4 C(TY 6.1 T(TL)		- 1.1			Change	Addition
TITLE NAME		L_ Detect	6.1 HILL 6.2 MAIA	F	7.	BORCE GANN 1601 SW 152 A		change	, loomon
			63 278	EI VDE	JREGG 23	601 5W 152 AT	VE"		
STREET ADDRESS CITY-ST-ZIP			6.4 CITY	- ST - 70	P MI	AMI, FL			
14 I do herel	I by cer tify that the information supplied	with this filing does not qua	lify for the ea	xemp	tion stated	in Section 119.07(3)(i). Florida Statute	s. I further	certify tha	it the
informatio	on indicated on this annual report or sufficer or director of the corporation or in Block 12 or Block 13 if changed, or	applemental annual report is the receiver or trustee empo	true and ac wered to exi	cura l ecrite	and that r this report	my signature shall have the same lega as required by Chapter 617, Florida S	i eriect as itatutes; ar	ii made ui id that my	nder bath; fhat name