2003 NOT-FOR-PROFIT CORPORATION

Jan 21, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State DOCUMENT # N15068** 01-21-2003 90175 046 ***150.00 FLORIDA NATIVE PLANT SOCIETY, INC. Principal Place of Business Mailing Address PO BOX 690278 PO BOX 690278 VERO BEACH FL 32969-0278 VERO BEACH FL 32969-0278 IIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2676375 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ZARILLO, KIM Street Address (P.O. Box Number is Not Acceptable) 760 CAJEPUT CIRCLE MELBOURNE VILLAGE FL 32904 City Zip Code 🚷. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD TITLE ☐ Delete TIT! E ☐ Change ☐ Addition ZARILLO, KIM NAME NAME STREET ADDRESS **760 CAJEPUT CIRCLE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE VILLAGE FL 32904 Change ☐ Addition TITLE ☐ Delete TITLE NAME ROBERTS, KATHERINE NAME STREET ADDRESS STREET ADDRESS 166 11TH AVE N CITY-ST-ZIP CITY-ST-ZIP SAFETY HARBOR FL 34695-3473 ☐ Delete ☐ Addition TITLE TITLE Change MACCLENDON, TRAVIS NAME NAME STREET ADDRESS STREET ADDRESS 3385 KENT DRIVE CITY-ST-7IP CITY-ST-ZIP **MELBOURNE FL 32935** ۷D ☐ Delete TITLE ☐ Change Addition TITLE NAME EGOLF, ROBERT NAME STREET ADDRESS STREET ADDRESS 852 ADLERSOOD WAY CITY-ST-ZIP CITY-ST-ZIP **SARASOTA FL 34243-1314** ☐ Delete TITLE ☐ Change Addition TITLE WELLER, CANDACE L NAME STREET ADDRESS STREET ADDRESS 1515 COUNTRY CLUB ROAD N CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33710-4430

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 accurage 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 furstee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the property of the pr changed, or on an attachment

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

ANDACE L. WELLER 11

☐ Change

☐ Addition

FILED