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FILED

Oct 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25664 (6)
1. Corporation Name
FLORIDA EXOTIC PEST PLANT COUNCIL, INCORPORATED



Principal Place of Business Mailing Address
% F ALLEN DRAY JR 3205 COLLEGE AVE FT LAUDERDALE FL 33314 US
% F ALLEN DRAY JR 3205 COLLEGE AVE FT LAUDERDALE FL 33314 US

3. Date Incorporated or Qualified
03/30/1988

4. FEI Number
65-0140632 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 c/o Dan Thayer

22 City & State 27 P.O. Box 24680

23 Zip 28 West Palm Beach, FL

24 Country 29 33416 30 USA

9. Name and Address of Current Registered Agent
DRAY, F A JR
3205 COLLEGE AVE
FT LAUDERDALE FL 33314

10. Name and Address of New Registered Agent

81 Name Dan Thayer

82 Street Address (P.O. Box Number is Not Acceptable) 3301 Gun Club Rd

83

84 City West Palm Beach FL 85 Zip Code 33406

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Dan Thayer 8-18-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DC	<input type="checkbox"/> DELETE
NAME	THEYER, DAN	
STREET ADDRESS	3301 GUN CLUB RD	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	DRAY, F A JR	
STREET ADDRESS	3205 COLLEGE AVE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	NELSON, BRIAN	
STREET ADDRESS	2379 BROAD STREET	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	JUBINSKY, GREG P.	
STREET ADDRESS	3917 COMMONWEALTH BLVD	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Thayer, Dan	
1.3 STREET ADDRESS	P.O. Box 24680 3301 Gun Club Rd.	
1.4 CITY-ST-ZIP	West Palm Bch., FL 33406	
2.1 TITLE	DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Jacqueline Smith	
2.3 STREET ADDRESS	3111-B13 Fortune Way	
2.4 CITY-ST-ZIP	Wellington, FL 33414	
3.1 TITLE	DC	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Anthony Pernas	
3.3 STREET ADDRESS	HER-61, Box 11	
3.4 CITY-ST-ZIP	Ochopee, FL 33943	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	500002682915	
5.3 STREET ADDRESS	-10/13/98-01069-038	
5.4 CITY-ST-ZIP	***61.25	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dan Thayer 8-18-98 561-172-1129

CR2E037 (10/97)