

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 17, 2006
Secretary of State

DOCUMENT# N25664

Entity Name: FLORIDA EXOTIC PEST PLANT COUNCIL, INCORPORATED

Current Principal Place of Business:

KRISTINA SERBESOFF-KING
574 S. BEACH ROAD
HOBE SOUND, FL 33455 US

New Principal Place of Business:

ELLEN DONLAN
3301 GUN CLUB ROAD
WEST PALM BEACH, FL 33406 US

Current Mailing Address:

C/O DIANNE OWEN
PO BOX 23426
FT. LAUDERDALE, FL 33307

New Mailing Address:

FEI Number: 65-0140632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SERBESOFF-KING, KRISTINA K
574 S. BEACH ROAD
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

DONLAN, ELLEN
3301 GUN CLUB ROAD
WEST PALM BEACH, FL 33406 US

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: ELLEN DONLAN

08/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: OWEN, DIANNE
Address: 2912 COLLEGE AVENUE
City-St-Zip: DAVIE, FL 33314

Title: C () Delete
Name: BURNEY, JIM
Address: PO BOX 2176
City-St-Zip: JUPITER, FL 33468

Title: CP () Delete
Name: BODLE, MICHAEL
Address: 3301 GUN CLUB ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DT () Delete
Name: SERBESOFF-KING, KRISTINA K
Address: 574 S. BEACH ROAD
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: OWEN, DIANNE
Address: PO BOX 23426
City-St-Zip: FT. LAUDERDALE, FL 33307

Title: C (X) Change () Addition
Name: FOX, ALISON
Address: PO BOX 110500
City-St-Zip: GAINESVILLE, FL 33468

Title: CP (X) Change () Addition
Name: BURNEY, JIM
Address: 6753 GARDEN ROAD, SUITE 109
City-St-Zip: RIVIERA BEACH, FL 33404

Title: DT (X) Change () Addition
Name: DONLAN, ELLEN
Address: 3301 GUN CLUB ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELLEN DONLAN

DT

08/17/2006

Electronic Signature of Signing Officer or Director

Date