

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25664

FILED  
Mar 02, 2007  
Secretary of State

Entity Name: FLORIDA EXOTIC PEST PLANT COUNCIL, INCORPORATED

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

ELLEN DONLAN  
3301 GUN CLUB ROAD MSC 5650  
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 ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

DONLAN, ELLEN  
3301 GUN CLUB ROAD MSC 5650  
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      03/02/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

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

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

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 M. DONLAN      DT      03/02/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date