

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State

02-26-2001 90535 032 ****61.25

DOCUMENT # N95000001150

1. Entity Name

SUNCOAST NATIVE PLANT SOCIETY, INC.

Principal Place of Business

Mailing Address

**13205 BURNES LAKE DR.
TAMPA FL 33612**

**P.O. BOX 82893
TAMPA FL 33682**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3308941

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPRIGGS, FREDRICK G
13205 BURNES LAKE DR.
TAMPA FL 33612**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Fredrick G Spriggs

N/A

2-18-2001

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SPRIGGS, FRED 13205 BURNES LAKE DR. TAMPA FL 33612	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KISH, GEORGE R 15018 MEADOWLAKE ST ODESSA FL 33556	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DICKMAN, STEVE 1504 E. MULBERRY DR TAMPA FL 33604	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ALBRITTON, KEN 12804 RAIN FOREST ST TEMPLE TERRACE FL 33617	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD RICHARD P. WUNDERLIN 2013 CURRY RD LUTZ, FL 33549	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD HARRIETT WRIGHT 4215 WATER OAKS LANE TAMPA FL 33624	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD CARMEL VAN HOOK 1027 BERRY AVE TAMPA, FL 33602	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Fredrick G Spriggs

2/18/01

8132876297

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)