I hereby 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 all other like empowered.

TREASURER

SIGNATURE: EDWIN W LIPPINCOTT

I

Electronic Signature of Signing Officer/Director Detail

0 Ti Ν A C Ti N Address 902 MIDDLE DRIVE FORT WALTON BEACH FL 32547-City-State-Zip: 2850

	Electronic Signature of Registered Agent				
Officer/Director Detail :					
Title	DP	Title	TD		
Name	VOELKER, ROSEMARIE	Name	LIPPINCOTT, EDWIN W		
Address	400 N SUNSET BLVD	Address	2817 JACK NICKLAUS WAY		
City-State-Zip:	GULF BREEZE FL 32561-4060	City-State-Zip:	SHALIMAR FL 32579-2227		
Title	SD				
Name	VANDERPOOL, LELAND				
Address	902 MIDDLE DRIVE				

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:

FEI Number: 59-3631436

Name and Address of Current Registered Agent:

LIPPINCOTT, EDWIN W 2817 JACK NICKLAUS WAY SHALIMAR, FL 32579-2227 US

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000002302

Entity Name: FORT WALTON BEACH BONSAI SOCIETY, INC.

Current Principal Place of Business:

2817 JACK NICKLAUS WAY SHALIMAR, FL 32579-2227

Current Mailing Address:

PO BOX 224 SHALIMAR, FL 32579-0224 US

Certificate of Status Desired: No

01/12/2017

FILED Jan 12, 2017 Secretary of State CC0096241712

Date

Date