

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710192

FILED
Mar 19, 2009
Secretary of State

Entity Name: FLORIDA PHOSPHATE COUNCIL, INC.

Current Principal Place of Business:

WESTCOTT STATION
150 SOUTH MONROE STREET, STE. 306
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

215 SOUTH MONROE ST, STE 730
TALLAHASSEE, FL 32301 US

Current Mailing Address:

WESTCOTT STATION
150 SOUTH MONROE STREET, STE. 306
TALLAHASSEE, FL 32301 US

New Mailing Address:

215 SOUTH MONROE ST, STE 730
TALLAHASSEE, FL 32301 US

FEI Number: 59-1101976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, MARK E
150 SOUTH MONROE ST.
SUITE 306
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

KAPLAN, MARK E
215 SOUTH MONROE ST.
SUITE 730
TALLAHASSEE, FL 32301 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:

03/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: PINNEY, STEVEN L
Address: 150 S. MONROE STREET, STE. 306
City-St-Zip: TALLAHASSEE, FL 32301

Title: PSD () Delete
Name: KAPLAN, MARK E
Address: 150 S. MONROE STREET, STE. 306
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: DAVIS, BO
Address: 150 S. MONROE STREET, STE. 306
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: PINNEY, STEVEN L
Address: 215 S. MONROE STREET, STE. 730
City-St-Zip: TALLAHASSEE, FL 32301

Title: PSD (X) Change () Addition
Name: KAPLAN, MARK E
Address: 215 S. MONROE STREET, STE. 730
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: DAVIS, BO
Address: 215 S. MONROE STREET, STE. 730
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify 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: MARK KAPLAN

PSD

03/19/2009

Electronic Signature of Signing Officer or Director

Date