

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732983

FILED
May 01, 2004
Secretary of State**Entity Name:** THE SOIL AND CROP SCIENCE SOCIETY OF FLORIDA, INC.**Current Principal Place of Business:**UNIV OF FLORIDA
PO BOX 110290
GAINESVILLE, FL 326110290 US**New Principal Place of Business:****Current Mailing Address:**UNIV OF FLORIDA
PO BOX 110290
GAINESVILLE, FL 326110290 US**New Mailing Address:****FEI Number:** 23-7415036**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**OBREZA, THOMAS
UNIV OF FLORIDA
2169 MCCARTY HALL
GAINESVILLE, FL 32611 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date _____

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: OBREZA, THOMAS
Address: 2169 MCCARTY HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: P () Delete
Name: STANLEY, CRAIG
Address: 5007 60TH ST EAST
City-St-Zip: BRADENTON, FL 34203

Title: PE () Delete
Name: CHAMBLISS, CARROL
Address: 305 NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: D () Delete
Name: NKEDI-KIZZA, PETER
Address: 2169 MCCARTY HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: D () Delete
Name: MUCHOVEI, ROSA
Address: 2686 SR 29TH NORTH
City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete
Name: ADJEI, MARTIN
Address: 3401 EXPERIMENT STATION
City-St-Zip: ONA, FL 33865

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: CHAMBLISS, CARROL
Address: 305 NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: PE (X) Change () Addition
Name: THOMAS, WILLIAM
Address: RT 18 BOX 720
City-St-Zip: LAKE CITY, FL 32025

Title: D (X) Change () Addition
Name: MCSORLEY, ROBERT
Address: BLDG 970, NATURAL AREA DR
City-St-Zip: GAINESVILLE, FL 32611

Title: D (X) Change () Addition
Name: MA, LENA
Address: 2169 MCCARTY HALL
City-St-Zip: GAINESVILLE, FL 32611

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 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 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: THOMAS OBREZA

ST

05/01/2004

Electronic Signature of Signing Officer or Director

Date