

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732983

FILED
May 14, 2007
Secretary of State

Entity Name: THE SOIL AND CROP SCIENCE SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

UNIV OF FLORIDA
2169 MCCARTY HALL
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 ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OBREZA, THOMAS
UNIV OF FLORIDA
2169 MCCARTY HALL
GAINESVILLE, FL 32611 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: _____

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: BOOTE, KENNETH
Address: 404 NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

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

Title: D () Delete
Name: MACDONALD, GREGORY
Address: 401 NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

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

Title: D (X) Delete
Name: DAROUB, SAMIRA
Address: 3200 E PALM BEACH RD
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OBREZA, THOMAS
Address: 2169 MCCARTY HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: ST (X) Change () Addition
Name: BOOTE, KENNETH
Address: 404 NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: D (X) Change () Addition
Name: DAROUB, SAMIRA
Address: 3200 E PALM BEACH RD
City-St-Zip: BELLE GLADE, FL 33430

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 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: THOMAS OBREZA

P

05/14/2007

Electronic Signature of Signing Officer or Director

Date