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Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90070 001 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 736361

1. Corporation Name

THE INTERNATIONAL PALM SOCIETY, INCORPORATED

Principal Place of Business
 4943 QUEEN VICTORIA RD.
 WOODLAND HILLS CA 91364

Mailing Address
 4943 QUEEN VICTORIA RD.
 WOODLAND HILLS CA 91364



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		07/12/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-0829820	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24		29		Trust Fund Contribution <input type="checkbox"/>	
Country		Country		\$5.00 May Be Added to Fees	
25		30			

9. Name and Address of Current Registered Agent

GOLDSTEIN, LEONARD H.
 8101 SW 72ND AVE #313-W
 MIAMI FL 33143

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAIN, JIMMY D	1.2 NAME	
STREET ADDRESS	12418 STAFFORD SPRINGS DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERGMAN, W. PHILIP	2.2 NAME	
STREET ADDRESS	3233 BRANT ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCKAMEY, LYNN	3.2 NAME	
STREET ADDRESS	P.O. BX 76, HWY 181	3.3 STREET ADDRESS	
CITY-ST-ZIP	GREGORY TX	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAGNER, ROSS T.	4.2 NAME	
STREET ADDRESS	4943 QUEEN VICTORIA RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND HILLS CA	4.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOBBS, HORACE O JR	5.2 NAME	
STREET ADDRESS	7310 ASHBURN	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	5.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BASIC, CHERYL	6.2 NAME	VD
STREET ADDRESS	362 WINSTANLEY ST	6.3 STREET ADDRESS	ROLF H. KYBURZ
CITY-ST-ZIP	CARINDALE BR	6.4 CITY-ST-ZIP	39 POINCIANNA DR.
			BROWNS PLAINS, QUEENSLAND 418, AUSTRALIA

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8 JAN 99 (818)-883-0447
 Date Daytime Phone #

CR2E037 (1/198)

REMAINDER OF BOARD OF DIRECTORS

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BESSE, LIBBY
 6729 PEACOCK RD
 SARASOTA, FL

BEZONA, NORMAN
 P.O. BOX 936
 PAPA IKOU, HI

BROWN, KYLE
 RT 2, BOX 2700,
 GLEN ST. MARY, FL

CRAFT, PAUL R.
 935 A HONEYTREE LN.
 WELLINGTON, FL

DELEUZE, JACQUES
 U GIARDINU DI L'ISULU, BACA
 SANTA LUCIA DI PORTIVECHJU
 CORSICA, FRANCE

DRAINFIELD, JOHN
 HERBARIUM ROYAL BOTANIC GARDEN
 KEW RICHMOND SURREY TW9 3AB, U.K.

EDWARDS, IAN
 2 BONNIE DOON PL
 CRONULLA, NSW, AUSTRALIA

EVANS, DON
 25105 SW 152 AVE.
 HOMESTEAD, FL

GIBBONS, MARTIN
 THE PALM CENTRE, HAM ST.
 HAM, RICHMOND SURREY TW10 7HA, U.K.

LUNDQVIST, BO-GÖRAN
 P.O. BOX 2071
 HAWAII, HI

MARCUS, JEFFREY L.
 P.O. BOX 635
 MT. VIEW, HI

MUIR, LYNN J.
 33802 VALENCIA PL
 DANA POINT, CA

PANCOAST, LESTER C.
 3351 POINCIANA AVE
 MIAMI, FL

PETERSON, BERNARD
 2410 STANFORD PR.
 COCOA, FL

PETERSEN, BOB
 2165 51ST TERRACE SW
 NAPLES, FL

REYNOLDS, JAMES
 4837 ANGUS DR.
 VANCOUVER, B.C., CANADA

BOWLAN
 6966 H
 RIVERS

SULLIVA
 3616 M
 VENTUR

TANSASIN, WIRIN
 SIAM SQUARE
 BANGKOK, THAILAND

TROLLIP, STEVE
 BOX 3622
 BRITS, SO. AFRICA

UHL, NATALIE W.
 L.H. BAILEY HORTORIUM
 467 MANN LIBRARY
 CORNELL UNIV., ITHACA, NY

VELEZ, RALPH
 15461 DEVONSHIRE CIRCE
 WEST. MINISTER, CA

WOOD, RICHARD
 3614 HANDEL AVE
 VANCOUVER, B.C., CANADA

WRIGHT, JIM J.
 2151 BURGNER BLVD
 SAN DIEGO, CA

ZONA, SCOTT
 FAIRCHILD TROPICAL GARDEN
 11935 OLD CUTLER RD.
 MIAMI, FL