

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736361

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** THE INTERNATIONAL PALM SOCIETY, INCORPORATED

**Current Principal Place of Business:**

11901 OLD CUTLER RD  
MIAMI, FL 33156

**New Principal Place of Business:**

11901 OLD CUTLER RD  
MIAMI, FL 33156 US

**Current Mailing Address:**

11901 OLD CUTLER RD  
MIAMI, FL 33156

**New Mailing Address:**

11901 OLD CUTLER RD  
MIAMI, FL 33156 US

**FEI Number:** 59-0829820

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOBLICK, LARRY  
11901 OLD CUTLER ROAD  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

NOBLICK, LARRY R SD  
11901 OLD CUTLER ROAD  
MIAMI, FL 33156 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: LARRY R NOBLICK

04/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LUNDKVIST, BO-GORAN  
Address: P.O. BOX 2071  
City-St-Zip: PAHOA, HI 96778 US

Title: TD ( ) Delete  
Name: MERRITT, MICHAEL  
Address: P.O. BOX 492463  
City-St-Zip: KEEAU, HI 96749 US

Title: SD ( ) Delete  
Name: NOBLICK, LARRY  
Address: 11901 OLD CUTLER RD.  
City-St-Zip: MIAMI, FL 33156 US

Title: VPD ( ) Delete  
Name: DEMOTT, JOHN  
Address: 18455 SW 264TH ST.  
City-St-Zip: HOMESTEAD, FL 33031 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: LARRY R NOBLICK

SD

04/14/2009

Electronic Signature of Signing Officer or Director

Date