2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737376

FILED Mar 09, 2006 Secretary of State

Entity Name: FLORIDA AQUATIC PLANT MANAGEMENT SOCIETY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

2002 E MICHIGAN ST ORLANDO, FL 32806 US

Current Mailing Address: New Mailing Address:

PO BOX 560700

ORLANDO, FL 32856 US

FEI Number: 59-2108135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FARR, DAVID

801 SOUTH ST

NEW SMYRNA BEACH, FL 32168 US

MYERS, JENNIFER

4305 BOMBER ROAD

BARTOW, FL 33830 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: JENNIFER L. MYERS 03/09/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 SETARAM, KESHAV
 Name:
 MOORE, BILL

 Address:
 800 MERCY DR
 Address:
 11512 LAKE KATHERINE CIRCLE

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: CLERMONT, FL 34711

Title: S () Delete Title: S (X) Change () Addition Name: HUEBNER, ANGIE Name: WALTERS, STEPHANIE

 Address:
 525 RIDGELAWN RD
 Address:
 PO BOX 200

 City-St-Zip:
 CLEWISTON, FL 334405599
 City-St-Zip:
 PLYMOUTH, FL 32768

Title: T () Delete Title: T (X) Change () Addition Name: FARR, DAVID Name: MYERS, JENNIFER

 Address:
 801 SOUTH ST
 Address:
 4305 BOMBER ROAD

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168
 City-St-Zip:
 BARTOW, FL 33930

Title: D () Delete Title: D (X) Change () Addition Name: BAUER, CHRISTINE Name: TORRES, BILL

Address: P.O. BOX 5 CODE 184 CB Address: 3900 COMMONWEALTH BLVD MS 705

City-St-Zip: JACKSONVILLE, FL 32212 City-St-Zip: TALLAHASSEE, FL 32399

 Name:
 OLSON, TODD
 Name:
 HALLER, WILLIAM

 Address:
 6753 GARDEN ROAD, SUITE 109
 Address:
 7922 NW 71ST ST

 City-St-Zip:
 RIVIERA BEACH, FL 33404
 City-St-Zip:
 GAINESVILLE, FL 32653

Title: D () Delete Title: D (X) Change () Addition Name: DUBOSE, CHANCE Name: DREW, JOHNNIE

 Name:
 DUBOSE, CHANCE
 Name:
 DREW, JOHNNIE

 Address:
 602 N. PALM AVE.
 Address:
 PO BOX 1429

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32178

I hereby certify that the information supplied with this filing does not qualify for the 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: JENNIFER L MYERS TRES 03/09/2006