2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# 737376

Entity Name: FLORIDA AQUATIC PLANT MANAGEMENT SOCIETY, INCORPORATED

Current Principal Place of Business:

2002 E MICHIGAN ST
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 560700
ORLANDO, FL 32856 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MYERS, JENNIFER
4305 BOMBER ROAD
BARTOW, FL 33830 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:	P	( ) Delete
Name:	DUBOSE, CHANCE	
Address:	602N PALM AVE	
City-St-Zip:	PALATKA, FL 32177	
Title:	S	( ) Delete
Name:	WALTERS, STEPHANIE	
Address:	PO BOX 200	
City-St-Zip:	PLYMOUTH, FL 32768	
Title:	T	( ) Delete
Name:	MYERS, JENNIFER	
Address:	4305 BOMBER ROAD	
City-St-Zip:	BARTOW, FL 33930	
Title:	D	( ) Delete
Name:	HARRIS, TIM	
Address:	602 N PALM AVE	
City-St-Zip:	PALATKA, FL 32177	
Title:	D	( ) Delete
Name:	ROBBIE, LOVESTRAND	
Address:	6355 SOUTH FLORIDA AVE	
City-St-Zip:	FLORAL CITY, FL 34436	
Title:	D	( ) Delete
Name:	EVERTSEN, JOHN	
Address:	1030 SOUTH WOODS AVE	
City-St-Zip:	ORLANDO, FL 32805	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	NETHERLAND, MICHAEL	
Address:	7922 NW 71ST STREET	
City-St-Zip:	GAINESVILLE, FL 32653	
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:		
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: JENNIFER L MYERS T 01/14/2009

Electronic Signature of Signing Officer or Director — Date