

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90012 050 ****61.25

DOCUMENT # 761104

1. Entity Name
TREE PAC, INC.



Principal Place of Business
C/ FLORIDA FORESTRY ASSOCIATION
402 E. JEFFERSON STREET, P.O. BOX 1696
TALLAHASSEE, FL 32302

Mailing Address
C/ FLORIDA FORESTRY ASSOCIATION
402 E. JEFFERSON STREET, P.O. BOX 1696
TALLAHASSEE, FL 32302

40038901



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01162007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2141178

Applied For
Not Applied

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DORAN, JEFF
402 EAST JEFFERSON
TALLAHASSEE, FL 32301

Name
SHELBY, ALAN

Street Address (P.O. Box Number is Not Acceptable)
402 EAST JEFFERSON STREET

City
TALLAHASSEE

FL Zip Code
32301

8. 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. I am familiar with, and accept the obligations of registered agent.

ALAN SHELBY

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/19/07

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	VOGEL, JOHN T.	
STREET ADDRESS	EAST DARBY ROAD	
CITY-ST-ZIP	SAN ANTONIO, FL	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	COOK, WILLIAM K.	
STREET ADDRESS	RT. 1 BOX 1675	
CITY-ST-ZIP	CALLAHAN, FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STOKES, HAROLD	
STREET ADDRESS	RT. 1, BOX 666	
CITY-ST-ZIP	BRYCEVILLE, FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PRITCHETT, MARVIN	
STREET ADDRESS	1050 SE 6TH ST.	
CITY-ST-ZIP	LAKE BUTLER, FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	VAN LOOCK, HARRY, J	
STREET ADDRESS	RT. 3, BOX 260	
CITY-ST-ZIP	PERRY, FL	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	COOK, BOB	
STREET ADDRESS	P.O. BOX 2249	
CITY-ST-ZIP	LAKE CITY, FL 32056	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	SIMMONS, DAN	
STREET ADDRESS	ONE BUCKEYE DRIVE	
CITY-ST-ZIP	PERRY, FL 32348	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	SHELBY, ALAN	
STREET ADDRESS	402 EAST JEFFERSON STREET	
CITY-ST-ZIP	TALLAHASSEE, FL 32301	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	VOGEL, JACK	
STREET ADDRESS	P.O. BOX 564	
CITY-ST-ZIP	SAN ANTONIO, FL 33576	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	SMITH, KELLY JR	
STREET ADDRESS	P.O. BOX 75	
CITY-ST-ZIP	BOSTWICK, FL 32007	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	COOK, BOB	
STREET ADDRESS	P.O. BOX 2249	
CITY-ST-ZIP	LAKE CITY, FL 32056	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Ad
NAME	BRANCH, MIKE	
STREET ADDRESS	P.O. BOX 1696	
CITY-ST-ZIP	TALLAHASSEE, FL 32302	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11, as changed, or on an attachment with an address, with all other like empowered.