2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762842

FILED Feb 05, 2009 Secretary of State

Entity Name: THE SOUTH FLORIDA PALM SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business: 10901 OLD CUTLER ROAD CORAL GABLES, FL 33156 US **Current Mailing Address: New Mailing Address:** 3001 SW 133 COURT MIAMI, FL 33175 FEI Number: 59-2528151 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: ALVAREZ, GEORGE A 3001 SW 133 COURT MIAMI, FL 33175 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition STERN, PETER S TALBOT, LINDA Name: Name: 25000 SW 152ND AVE. Address: 1580 HAMMOND DRIVE Address: City-St-Zip: MIAMI, FL 33032 City-St-Zip: MIAMI SPRINGS, FL 33166 Title: (X) Change () Addition

Title: TD () Delete Name: GEORGE, ALVAREZ Address: 3001 SW 133 CT. City-St-Zip: MIAMI, FL 33175 Title:

() Delete MCKERNAN, TIM Name: 9440 SW 120 ST Address: City-St-Zip: MIAMI, FL 33176

() Delete Title: CHAIT, JEFF

Name: 9621 SW 102ND STREET Address: City-St-Zip: MIAMI, FL 33176

Title: VPD () Delete DEMOTT, JOHN Name:

18455 S.W. 264TH STREET Address: City-St-Zip: MIAMI, FL 33031

Title: () Delete

OLSON, WILLIAM R JR. Name: Address: 30150 SW 170 AVE HOMESTEAD, FL 33030 City-St-Zip:

Name: ALVAREZ, GEORGE Address: 3001 SW 133 CT. City-St-Zip: MIAMI, FL 33175

Title: PD (X) Change () Addition MCKERNAN, TIM Name:

Address: 9440 SW 120 ST City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

> Title: (X) Change () Addition

OLSON, WILLIAM R JR. Name: Address: 30150 SW 170 AVE. HOMESTEAD, FL 33030 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: GEORGE ALVAREZ TD 02/05/2009