

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000301

FILED
Apr 30, 2011
Secretary of State

Entity Name: THE FLORIDA SWAMPLANDS FOUNDATION, INC.

Current Principal Place of Business:

4950 S.W. 82ND ST.
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

4950 S.W. 82ND ST.
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0976375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WILSON
4950 S.W. 82ND ST.
MIAMI, FL 33143 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: D/P
Name: SMITH, WILSON
Address: 4950 S.W. 82ND ST.
City-St-Zip: MIAMI, FL 33143

Title: D
Name: MIRMAN, BEVERLY
Address: 10 HORSE CREEK RUN
City-St-Zip: PINEHURST, NC 28374

Title: D
Name: SMITH, JUDY
Address: 5213 S. CRESCENT DRIVE
City-St-Zip: TAMPA, FL 33611

Title: D
Name: MIRMAN, CHARLES
Address: 10 HORSE CREEK RUN
City-St-Zip: PINEHURST, NC 28374

Title: DST
Name: LARSON, LORIE S
Address: 5213 S. CRESCENT DR.
City-St-Zip: TAMPA, FL 33611

Title: D
Name: GOLDMAN, RICHARD
Address: 172 CAJEPUT DR.
City-St-Zip: NAPLES, FL 34108

I hereby 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 all other like empowered.

SIGNATURE: LORIE S. LARSON

SEC

04/30/2011

Electronic Signature of Signing Officer or Director

Date