2007 NOT-FOR-PROFIT CORPORATION

Mar 12, 2007 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT # N00000004708** 03-12-2007 90367 007 ****61.25 PFLAG, VERO BEACH CHAPTER, INC. Principal Place of Business Mailing Address 1425 56TH SQ WEST PO BOX 650533 VERO BEACH, FL 32966 VERO BEACH, FL 32659 * 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BURNS, CAROL 1425-56TH SQUARE W. Street Address (P.O. Box Number is Not Acceptable) VERO BEACH, FL 32966-2397 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE PD ☐ Detete TITLE ☐ Change ☐ Addition GOODWIN, SUE NAME NAME 3175 1ST RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32968 CITY-ST-ZIP Dana Owens 1630-20th Court SW TITLE Delete TITLE Addition SOTO, LOURDES NAME STREET ADDRESS 265 13TH MANOR 11-107 STREET ADDRESS VERO BEACH, FL 32960 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition O'MALLEY, MICHAEL NAME NAME STREET ADDRESS 2110-87 AVE STREET ADDRESS VERO BEACH, FL 32969 CITY-ST-ZIP CITY-ST-ZIP TITLE TD Delete TITLE ☐ Change Addition BURNS, CARL NAME NAME 1425-56TH SQUARE W. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 329662397 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition

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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 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS CITY-ST-ZIP

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR