

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001078

FILED
Feb 04, 2011
Secretary of State

Entity Name: THE FLORIDA WILDFLOWER FOUNDATION, INC.

Current Principal Place of Business:

321 WHITE OAK CIRCLE
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 94-1066
MAITLAND, FL 327941066 US

New Mailing Address:

FEI Number: 59-3700304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, LISA
321 WHITE OAK CIRCLE
MAITLAND, FL 32751 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
Name: ZINN, TERRY
Address: 27715 NW 107 STREET
City-St-Zip: ALACHUA, FL 32615 US

Title: TD
Name: SCHAAG, CAROLYN
Address: 22125 DRAWBRIDGE DR.
City-St-Zip: LEESBURG, FL 347482303 US

Title: D
Name: CASTER, JEFF
Address: 605 SUWANNEE STREET MS 37
City-St-Zip: TALLAHASSEE, FL 32399

Title: D
Name: HENRY, GARY
Address: 1126 BRANDT DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: MACKAY, ANNE
Address: 12050 E. HWY 25
City-St-Zip: OCKLAWAHA, FL 32179

Title: D
Name: WALTOR, TAYLOR K PHD
Address: 2415 BAXTER COURT
City-St-Zip: WINTER PARK, FL 327921703

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: CAROLYN SCHAAG

TREA

02/04/2011

Electronic Signature of Signing Officer or Director

Date