2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Jan 16, 2003 8:00 am Secretary of State DOCUMENT # N01000002250 1. Entity Name 01-16-2003 90044 020 ****61.25 THE PASSIFLORA SOCIETY INTERNATIONAL, INC. Principal Place of Business Mailing Address 3600 W SAMPLE RD 3800 W SAMPLE RD COCONUT CREEK FL 33073 COCONUT CREEK FL 33073 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-1094479 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired - Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BOENDER, RONALD** Street Address (P.O. Box Number is Not Acceptable) 3600 W SAMPLE RD **COCONUT CREEK FL 33073** 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) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change Addition BOENDER, RONALD NAME NAME 3600 W SAMPLE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COCONUT CREEK FL 33073 CITY-ST-ZIP VD TITLE ☐ Delete TITLE Change Addition EMMEL, THOMAS C NAME NAME 3600 W SAMPLE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COCONUT CREEK FL 33073 CITY-ST-ZIP STD ☐ Delete TITLE ☐ Change ☐ Addition ZINNO, ANNA NAME 3600 W SAMPLE RD STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 33073 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS

ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information discourate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supple of the corporation or the received tal report is tru trustee empowe changed, or on an attach npowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

12. I hereby certify that the information supplied with this

CITY-ST-7IP

FILED