2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

DOCUMENT# N01000002919

Entity Name: CENTER TO PRESERVE NATIVE FLORIDA, INC.

Current Principal Place of Business:

16750 STATE RD 52
LAND O LAKES, FL 346390158 US

New Principal Place of Business:

16750 STATE RD 52
LAND O LAKES, FL 34638 US

Current Mailing Address:

POST OFFICE BOX 158
LAND O LAKES, FL 346390158 US

New Mailing Address:

FEI Number: 59-3715028 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEXLEY, MABEL H
16750 SR 52
LAND O LAKES, FL 346390158 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: BEXLEY, JAMES P
Address: PO BOX 158
City-St-Zip: LAND O LAKES, FL 346390158 US

Title: D
Name: BEXLEY, MABEL H
Address: PO BOX 158
City-St-Zip: LAND O LAKES, FL 346390158 US

Title: D
Name: HEALIS, TYLER F
Address: PO BOX 24945
City-St-Zip: FORT LAUDERDALE, FL 33307 US

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: MABEL H. BEXLEY D 04/17/2012

Electronic Signature of Signing Officer or Director — Date