

2002 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jul 24, 2002 8:00 am
Secretary of State

05-20-2002 90255 029 ****61.25

DOCUMENT # N01000004321

1. Entity Name

KORESHAN BOTANICAL SOCIETY INC.

Principal Place of Business

**3700 ELLIS RD
 FT. MYERS FL 33905
 US**

Mailing Address

**3700 ELLIS RD
 FT. MYERS FL 33905
 US**

39549

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1133787

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MACDONALD, ROSS B
 3700 ELLIS RD
 FT. MYERS FL 33905**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Director
 MacDonald, Ross B
 3700 Ellis Rd
 Ft. Myers FL 33905**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Director
 Flora Jones
 12494 Riverside Dr
 Ft. Myers FL 33919**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**Director
 Karen Montgomery
 21100 Cypress PK C/O
 Estero FL 33928**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Karen Montgomery

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

ROSS B. MacDonald

Date

4/26/02 239 334 416

Daytime Phone #

CR2E037 (9/01)

Attachment



39549

N01000004321

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 29, 2002

KORESHAN BOTANICAL SOCIETY INC.
3700 ELLIS RD
FT. MYERS, FL 33905 US

Sorry about being late
These new directors were
out of town.

Subject: KORESHAN BOTANICAL SOCIETY INC.

Reference Number: N01000004321

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850)-488-9000.

/JC

ANNUAL REPORTS SECTION

reinstatement

850-245-6059