

**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 02, 2010  
Secretary of State**

DOCUMENT# N02000003270

Entity Name: FLORIDA KEYS BOTANICAL CENTER, INC.

**Current Principal Place of Business:**

18455 SW 264 STREET  
HOMESTEAD, FL 33031

**New Principal Place of Business:**

**Current Mailing Address:**

18455 SW 264 STREET  
HOMESTEAD, FL 33031

**New Mailing Address:**

FEI Number: 30-0195747      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DEMOTT, JOHN C  
18455 SW 264TH STREET  
HOMESTEAD, FL 33031      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: DEMOTT, JOHN C  
Address: 18455 SW 264TH STREET  
City-St-Zip: HOMESTEAD, FL 33031

Title: D  
Name: CRAFT, PAUL  
Address: 18455 SW 264TH STREET  
City-St-Zip: HOMESTEAD, FL 33031

Title: D  
Name: HARRIS, JOHN  
Address: 18455 SW 264TH STREET  
City-St-Zip: HOMESTEAD, FL 33031

Title: D  
Name: CRISPIN, WILLIAM K  
Address: 93351 OVERSEAS HIGHWAY, #3  
City-St-Zip: TAVERNIER, FL 33070

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: JOHN C. DEMOTT

D

03/02/2010

Electronic Signature of Signing Officer or Director

Date