2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 06, 2007 8:00 am Secretary of State

3/21

DOCUMENT # N05000006965 1. Entity Name						03-20-2007 90018 001 ****61.2					
NATIONAL MANGO BOARD INC.											
Principal Place of Business Mailing Address											
1417 CARDII ORLANDO F US		1417 CARDINAL ROAD ORLANDO FL 32803 US									
2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Addross			i immitien dit	. Maitri Armi B Ath Can	n anna Alith Arcti	1 amii 1040	A DATE SALE	II DE DE 1881	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				1st MOORE CR2E037 (10/06)					
City & State	9	City & State				4. FEI Number Applied Fo 20-3115187 Not Applied					lied For Applicable
Zip	Country	Zip	Cou	untry		5. Cartificate of St			\$8.75 Fee Re	Addi	lional
	6. Name and Address of Current	Registered Agent		Name		7. Name and Add	ress of New I	Registered	Agent		
WATSON, WILLIAM 1417 CARDINAL ROAD				Street Address (P.O. Box Number is Not Accoptable)							
ORL	ANDO FL 32803										
				City	-			FL	• `	Code	
8. The above named ontity 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 here of regulared agent and trie if applicable. (NOTE: Registered Apert signature required whon reinstaing) DATE											
муников, прим се ризлам ната се подменям адент ант тов и ентромени. — (посте подменям крате воднатия подмен отполняться (посте подменям крате воднатия подмен отполняться (посте подменям крате воднатия подменям											
FILE NOW: FEE IS \$61,25 Due By May 1, 2007 Prost Fund Contribut)	\$5.00 May Be Added to Fees		ke Chec da Depar			
10. OFFICERS AND DIRECTORS					Δ.	ADDITIONS/CHANG	ES TO OFFICE	RS AND DI	RECTO	S IN	
TITLE NAME	PVST Delete 11 WATSON, WILLIAM			e	, ,	2. Oalmett	a Ane	ر ن <i>د</i> # ر	25 Ctra	inge	Addition
STREET ADDRESS CITY-ST-ZIP	1417 CARDINAL ROAD S			FT ADDRESS -SI-78P	かり	y Palmett interPar	E FL	3278	9		
TITLE NAME		Detele	(IIII)			_			Cha	inge	Addition
STREET ADDRESS CITY-ST-ZIP			SIRE	ET ADDRESS -ST-ZIP							
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TITLE	. – – – –	☐ Delete	IIIII					_	Cha	inge	Addition
SIPEE1 ADDRESS City-St-Zip	· 		SIRE	ET ADDRESS F-ST-ZIP							
MALE		☐ Deleic	THIC	1					Cha	inge	Addition
NAME STREET ADORESS CITY-ST-ZIP			STRE	TET ADDPESS (1-ST-21P							İ
INTE		☐ Delele	HILL	I .					☐ Cha	ange -	Addition
STREET ADDRESS CITY-SI-71P				IL If I adopess I-SI-ZIP							
12. I horeby certify that the information supplied with this fiting does not qualify for the exemptions contained in Section 119, 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 eath; that I am an officer or director of the corporation or the receiver or flusted 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 attachapent without address, with all other like empowered.											
1000											
SIGNATURE: DIGINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Confirm Phone #											