2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006873

Apr 16, 2009 Secretary of State

Entity Name: FLORIDA NURSERY, GROWERS AND LANDSCAPE ASSOCIATION OF THE TREASURE COAST, INC.

Current Principal Place of Business: New Principal Place of Business: 5500 SW MARTIN HWY. PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 5500 SW MARTIN HWY. PALM CITY, FL 34990 FEI Number: 32-0256892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR

MIAMI, FL 33145 US

PINDER, THERESA A MS 5500 SW MARTIN HWY US PALM CITY, FL 34990

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: THERESA PINDER 04/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition PINDER, THERESA Name: Name: 5500 SW MARTIN HWY. Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: Title: (X) Change () Addition () Delete HALL, CYNTHIA Name: HALL, CYNTHIA Name: Address: 5500 SW MARTIN HWY. Address: 1069 NE CRESCENT ST City-St-Zip: PALM CITY, FL 34990 City-St-Zip: JENSEN BEACH, FL 34957 Title: () Delete Title: (X) Change () Addition SOJKA, LIN HEGEDUS, GLEN Name: Name: 5500 SW MARTIN HWY. Address: Address: 4505 SW KANNER HWY City-St-Zip: PALM CITY, FL 34990 City-St-Zip: STUART, FL 34997 Title: () Delete Title: D (X) Change () Addition Name: MCANENY, MICHAEL C JR. Name: FELL, ALEX 5500 SW MARTIN HWY. Address: Address: 1555 NORTH KINGS HWY City-St-Zip: PALM CITY, FL 34990 City-St-Zip: FT. PIERCE, FL 34947 Title: () Delete Title: (X) Change () Addition HEGEDUS, GLEN KRAFT, KEVIN Name: Name: 5500 SW MARTIN HWY. 1555 NORTH KINGS HWY Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: FT PIERCE, FL 34947 Title: () Delete Title: (X) Change () Addition ROBERTS, BUD FELL, ALEX Name: Name: Address: 5500 SW MARTIN HWY. Address: 437 ROUSE RD PALM CITY, FL 34990 FT PIERCE, FL 34997 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THERESA PINDER Ρ 04/16/2009