

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001376

FILED
Apr 03, 2012
Secretary of State

Entity Name: NORTH PORT COMMUNITY GARDENS, INC.

Current Principal Place of Business:

4462 SYMCO AVENUE
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

4462 SYMCO AVENUE
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: 38-3809175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASS, FREDERICK G
4462 SYMCO AVENUE
NORTH PORT, FL 34286 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: KACZOR, LOIS
Address: 5722 NORTH CRANBERRY BLVD
City-St-Zip: NORTH PORT, FL 34286

Title: D
Name: INMAN, BARBARA
Address: 6655 MAURIUS RD
City-St-Zip: NORTH PORT, FL 34287

Title: S
Name: KRONHOLM, LINDA
Address: 3653 LAKEWOOD BLVD.
City-St-Zip: NORTH PORT, FL 34287

Title: T
Name: CASS, DONNA
Address: 4462 SYMCO AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: D
Name: GERBERICH, ANDREW
Address: 5004 WHITE IBIS DRIVE
City-St-Zip: NORTH PORT, FL 34287

Title: D
Name: CASS, FREDERICK G
Address: 4462 SYMCO AVENUE
City-St-Zip: NORTH PORT, FL 34286

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: FREDERIC G. CASS

D

04/03/2012

Electronic Signature of Signing Officer or Director

Date