2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2010
Secretary of State

DOCUMENT# N25702

Entity Name: EVERGLADES PROTECTION SOCIETY, INC.

Current Principal Place of Business:

22951 SW 190 AVENUE
MIAMI, FL 33170

New Principal Place of Business:

Current Mailing Address:

22951 SW 190 AVENUE
MIAMI, FL 33170

New Mailing Address:

FEI Number: 65-0051302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWELL, BARBARA J MS
22951 SW 190 AVE
MIAMI, FL 33170 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: P
Name: POWELL, BARBARA JEAN
Address: 22951 S.W. 190 AVENUE
City-St-Zip: MIAMI, FL 33170 US

Title: V
Name: LOWERY, STEVE MR
Address: 3043 SW ASH PL
City-St-Zip: PALM CITY, FL 33334 US

Title: D
Name: KIMMEL, ERIC MR
Address: 12685 SW 200 ST
City-St-Zip: MIAMI, FL 33177 US

Title: D
Name: JAMES, CLONINGER MR
Address: 25265 SW 134 AVE
City-St-Zip: PRINCETON, FL 33032 US

Title: D
Name: RUTZKE, BARNEY J MR
Address: 30201 S.W. 173 AVE
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: DENNINGER, FRANK MR
Address: 461 E 40 ST
City-St-Zip: HIALEAH, FL 33013 US

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: BARBARA JEAN POWELL P 03/23/2010

Electronic Signature of Signing Officer or Director — Date