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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 **DOCUMENT** #

N32908

(8)

INTERAMERICAN SOCIETY FOR TROPICAL HORTICULTURE, INC.

Principal Place of Business Mailing Address 18905 SW 290TH ST 18905 SW 280TH ST 3. Date incorporated or Qualified HOMESTEAD FL 33031 HOMESTEAD FL 33031 06/20/1989 4. FEI Number Applied For 65-0127202 Not Applicable 2a. Mailing Address 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution Added to Fees 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 23 28 Country Country Zip Zip 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CAMPBELL, CARL W., DR. Street Address (P.O. Box Number is Not Acceptable) 18905 SW 280TH ST 83 HOMESTEAD FL 33031 84 City Zip Code 85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 817.0503, Florida hattues.

SIGNATURE

SIGNATURE

12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE CAMPBELL, CARL W., (DR) 1.2 NAME NAME 18905 SW 280TH ST STREET ADDRESS 1.3 STREET ADDRESS HOMESTEAD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE **GRANADOS, JUAN CARLOS** 22 NAME EYBAR ROJAS NAME AVE LARA CON CALLE CAPANAPARO BARQUISIMETO VE STREET ADDRESS **5A AVI A 358 ZONA 1** 2.3 STREET ADDRESS RETALHULEU GU CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change TITLE GUILLERMO PARODI UNIV. NACIONAL AGR. LA MOLINA, DEPT. HORT NAME ROJAS, EYBAR 3.2 NAME AVE LARA CON CALLE CAPANAPARO STREET ADDRESS 3.3 STREET ADDRESS APDO 456 LIMA BAROUISIMETO VE CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME CAMPBELL, RICHARD, DR 4. 2 NAME 11935 OLD CUTLER RD 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE

83240 HERMOSILLO SO CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

PARODI. GUILLERMO

APDO 456 LIMA PE

BAEZ-SANUDO, DR REGINALD

UNIV NACIONEL AG LA MDINA DEPT DE HART

AVE DEL PASEO NO 11 FRAGG NUEVA GALICIA

CARL W. CAMPBELL Mar. 2,1998

PETER STOFFELLA

2149 SOUTH ROCK AD FT PIERCE, FL 34945

Change

Addition

FILED

Mar 09 1998 8:00am

Secretary of State

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