2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 08:00 AM
Secretary of State

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1. Entity Name
THE PINELLAS CHAPTER OF THE FLORIDA NATIVE PLANT SOCIETY, INC.

Principal Place of Business	Mailing Address
12501 INDIAN ROCKS ROAD LARGO, FL 33774 US	P.O. BOX 1661 PINELLAS PARK, FL 33780-1661 US

DO NOT WRITE IN THIS SPACE

01262005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3165769

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURLEY, BRUCE
12501 INDIAN ROCKS ROAD
LARGO, FL 33774

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable *(NOTE: Registered Agent signature required when reinstating)*

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	PEACOCK, CINDY
STREET ADDRESS	PO BOX 1031
CITY-ST-ZIP	CRYSTAL BEACH, FL 34681
TITLE	TD
NAME	WILLIAMS, MARTHA J
STREET ADDRESS	217 NORTH HILLCREST
CITY-ST-ZIP	CLEARWATER, FL 33755
TITLE	PD
NAME	QUINDIADGAN, CATHY
STREET ADDRESS	285 - 3RD STREET WEST
CITY-ST-ZIP	TIERRA VERDE, FL 337151718
TITLE	SD
NAME	ALLYN, JAN
STREET ADDRESS	9629 105TH AVENUE NORTH
CITY-ST-ZIP	LARGO, FL 33773
TITLE	D
NAME	TURLEY, BRUCE
STREET ADDRESS	2401 SOUTHSHORE DRIVE SE
CITY-ST-ZIP	ST PETERSBURG, FL 33705
TITLE	CD-A
NAME	CHAYET, DEBORAH
STREET ADDRESS	2138 LITTLE BROOK LANE
CITY-ST-ZIP	CLEARWATER, FL 33763

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02/02/05-80100-023 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martha Jane Williams 01/28/2005 727-447-78
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #