2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N93000000306

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

FILED
07 JAN 30 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

01122006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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	7. Name and Address of New Registered Agent
TURLEY, BRUCE 12501 INDIAN ROCKS ROAD LARGO, FL 33774	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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, 2006

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PEACOCK, CINDY PO BOX 1031 CRYSTAL BEACH, FL 34681	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RAY WUNDERLICH III 1863 43rd Avenue North St Petersburg, FL 33703	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WILLIAMS, MARTHA J 217 NORTH HILLCREST CLEARWATER, FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD QUINDIADGAN, CATHY 285 - 3RD STREET WEST TIERRA VERDE, FL 337151718	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Bill Bilodeau 5901 20th Avenue North St Petersburg, FL 33710	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ALLYN, JAN 9629 105TH AVENUE NORTH LARGO, FL 33773	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TURLEY, BRUCE 2401 SOUTHSHORE DRIVE SE ST PETERSBURG, FL 33705	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	600087361956 02/05/07--01013--030 **70.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD-A CHAYET, DEBORAH 2138 LITTLE BROOK LANE CLEARWATER, FL 33763	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 MARTHA JANE WILLIAMS 01/23/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

727-447-7394

JC 2/1