

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 24, 2011
Secretary of State

DOCUMENT# N94000000581

Entity Name: FLORIDA WEED SCIENCE SOCIETY, INC.**Current Principal Place of Business:**14625 CR 672
WIMAUMA, FL 33598**New Principal Place of Business:**3401 EXPERIMENT STATION
ONA, FL 33865**Current Mailing Address:**14625 CR 672
WIMAUMA, FL 33598**New Mailing Address:**3401 EXPERIMENT STATION
ONA, FL 33865**FEI Number:** 59-3224781**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MACRAE, ANDREW W
14625 CR 672
WIMAUMA, FL 33598 US**Name and Address of New Registered Agent:**SELLERS, BRENT A
3401 EXPERIMENT STATION
ONA, FL 33865 US

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: BRENT SELLERS

10/24/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: FERRELL, JASON
Address: 301 A NEWELL HALL
City-St-Zip: GAINESVILLE, FL 32611

Title: ST
Name: SELLERS, BRENT A
Address: 3401 EXPERIMENT STATION
City-St-Zip: ONA, FL 33865

Title: VP
Name: JAIN, RAKESH
Address: 7145 58TH AVE
City-St-Zip: VERO BEACH, FL 32967

Title: D
Name: RAWLS, ERIK
Address: 7145 58TH AVE
City-St-Zip: VERO BEACH, FL 32967

Title: PP
Name: NANCE, JERRY
Address: 1 LAKE LINK DR
City-St-Zip: WINTER HAVEN, FL 33884

Title: P
Name: SMITH, CLYDE
Address: 2228 BRIDGE CREEK ROAD
City-St-Zip: MARIANNA, FL 32448

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: BRENT SELLERS

ST

10/24/2011

Electronic Signature of Signing Officer or Director

Date