2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Jul 06, 2005 8:00 am
Secretary of State
07-06-2005 90033 018 ****70.00

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06302005 Chg-NP CR2E037 (10/03)

DOCUMENT # N94000003558

1. Entity Name
THE HORTICULTURE SOCIETY OF SOUTH FLORIDA, INC.

Principal Place of Business
464 FERN STREET
WEST PALM BEACH, FL 33401 US

Mailing Address
464 FERN STREET
WEST PALM BEACH, FL 33401 US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 65-0511526 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
~~MURDOCK, DAVID~~
464 FERN ST.
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent
Name: Joy Adle
Street Address (P.O. Box Number is Not Acceptable): 464 Fern St
City: West Palm Beach, FL 33401 — 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: Joy Adle — Joy Adle — Assistant Director — 6/29/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is $61.25
Due by September 7, 2005

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	D ☑ Delete	TITLE	Don Pickett ☐ Change ☑ Addition
NAME	GRACE, JANE R	NAME	1550 Florida Mango Rd.
STREET ADDRESS	126 SEAGRAPE CIRCLE	STREET ADDRESS	West Palm Beach, FL 33406
CITY-ST-ZIP	PALM BCH, FL 33480	CITY-ST-ZIP	
TITLE	ED ☑ Delete	TITLE	Donna Raggenthien ☐ Change ☑ Addition
NAME	MURBACH, DAVID	NAME	1901 Emilio Lane
STREET ADDRESS	464 FERN ST.	STREET ADDRESS	West Palm Beach, FL 33406
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	
TITLE	P ☑ Delete	TITLE	David Meeker ☐ Change ☑ Addition
NAME	BARDES, MERRILYN	NAME	725 Claremore Dr.
STREET ADDRESS	196 BANYAN RD.	STREET ADDRESS	West Palm Beach, FL 33401
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	
TITLE	DV ☐ Delete	TITLE	Susan Pickering ☐ Change ☑ Addition
NAME	PANNILL, WILLIAM G	NAME	525 So. Flagler Dr. Apt. 22F
STREET ADDRESS	4 S LAKE TRAIL	STREET ADDRESS	West Palm Beach, FL 33401
CITY-ST-ZIP	PALM BEACH, FL 33480	CITY-ST-ZIP	
TITLE	DS ☐ Delete	TITLE	Beatriz Ford ☐ Change ☑ Addition
NAME	HUNTER, FRANCES	NAME	300 Regent Park
STREET ADDRESS	201 PORTER ROAD	STREET ADDRESS	Palm Beach, FL 33480
CITY-ST-ZIP	WEST PALM BEACH, FL	CITY-ST-ZIP	
TITLE	D ☑ Delete	TITLE	David Denton ☐ Change ☑ Addition
NAME	WHITAKER, DOROTHY	NAME	11341 W. Teach Rd.
STREET ADDRESS	1200 S. FLAGLER DR	STREET ADDRESS	Palm Beach Gardens, FL 33410
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	

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: Joy Adle — Joy Adle — 6/29/05 — 561-655-5522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #