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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

N95000000235 (0)

THE FLORIDA STATE FLORIST FOUNDATION, INC.

Mailing Address Principal Place of Business - 628 PARK AVENUE GOUTF 329 PARK AVENUE SOUTH WINTER PARK FL 02700 WINTER PARK FL 32789 3. Date Incorporated or Qualified 3a. Date of Last Report 01/17/1995 NONE Applied For 2. Principal Place of Business 2a. Mailing Address l Number 717 31 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Ζıp 24 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 F & L CORP. Street Address (P.O. Box Number is Not Acceptable) 200 LAURA STREET 83 JACKSONVILLE FL 32201 Zip Code 85 84 City 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 617.0503, Florida Statutes. INOTE: Registered Agent signature required when rensta Q10 ECTO 68—60471 HUTED SIGNATURE Signature, typed or printed name of registered agent and title if applicable (12/95)13. 1.1 TITLE OFFICERS AND DIRECTORS 12. pres & director Change Addition DELETE TITLE MARIE PIERCE ann Martin 1370 HWY 29 SOUTH 1.2 NAME NAME TOWNERT, F2. 329 PARK AV S 1.3 STREET ADDRESS STREET ADDRESS WINTER PLACE 32789 1.4 CITY-ST-ZIP CITY - ST - ZIP WIL SIMONEOU V.P. DE 1343 SHELL EST BUD.WE V.P. DELETE DIRWOR 2.1 TiTLE TITLE GEND KONT CHICK 2.2 NAME NAME 108 STEWNET ST N.E. ST. PETERSBURG, FL 2.3 STREET ADDRESS STREET ADDRESS MILTON, FL 32570 2. 4 CITY - ST-ZIP CITY - ST - ZIP DIRECTOR ☐ Change ☐ Addition SEC. & DIRECTOR TITLE TIDELETE 3 1 TITLE GEORGIA PENDORVIS 10452 NEW KINGS PO. CHERIL PERSON 3 2 NAME NAME MAN TO 3.3 STREET ADDRESS STREET ADDRESS ety heborite 3441) JACKSONVINE, The 32219 3.4. CITY-ST-ZIP CITY-ST-ZIP TREOCORCE & DIRECTOR DELETE DIRECTOR Change ☐ Addition 4 1 TITLE THILE EMMETT O'DELL 717 315 ST JIM NEW 4 2 NAME NAME 1270 N. PSLM AV. 4.3 STREET ADDRESS STREET ADDRESS 568060Th IPL 34236 oplan00, TL 32805 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE PIRRUPR Change DIRECTOR 5.1 TITLE TITLE FAVE STOUTSMIRE WILLIAM HARD 5.2 NAME - 3030 471 ST. 457 NORTHWOOD RO 474 5 3 STREET ADDRESS STREET ADDRESS MARINUM, FL 3247- 32446 W. POUR BUY ,TL 3340) 5 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change DIRECTOR accor 6.1 THE TITLE KEN STOUTHHIRE STEVE ROBERIS 6.2 NAME NAME ATH ST. 3030 420 W. HAN 91 6.3 STREET ADDRESS STREET ADDRESS 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. 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.

SIGNATURE:

EMMETT O'DELL

12 FEB 96

407-245-2878

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BOB GILL, DIEECTOR 900 TAMIAMI TR. POET CHARLOTTE, FL 33948

GUS DE LA FLOR, DIDECTOR 14700 NN 7TH W MIAMI TR 33168

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