## **2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## Apr 28, 2008 8:00 am Secretary of State **DOCUMENT # N95000003541** 04-28-2008 90363 016 \*\*\*\*61.25 FLORIDA NATIVE PLANT SOCIETY - PAWPAW CHAPTER, INC Principal Place of Business Mailing Address 14 RAINTREE CT PO BOX 250516 HOLLY HILL, FL 32125 ORMOND BEACH, FL 32174 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04222008 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 59-3329268 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BURDICK, FRANCES R** 14 RAINTREE CT Street Address (P.O. Box Number is Not Acceptable) ORMOND BEACH, FL 32174 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD Delete TITLE Change **Addition** TITLE REBMANN, PAUL Wheeler, Mark NAME 35 PineGrove Drive STREET ADDRESS 3 NEPTUNE PARK STREET ADDRESS ORMOND BEACH, FL 32176 CITY-ST-ZIP Palm Coust 32164 CITY-ST-ZIP VP Delete Rebmann, Rul TITLE TITLE Change ☐ Addition REBMANN, PAUL NAME NAME 3 Neptune Park 3 NEPTUNE PARK STREET ADDRESS STREET ADDRESS Ormand Beach, FL 32176 ORMOND BEACH, FL 32176 CITY-ST-7IP CITY-ST-ZIP TD TITLE Delete TITLE ☐ Change ☐ Addition BURDICK, FRANCES R NAME NAME 14 RAINTREE CT STREET ADDRESS STREET ADDRESS ORMOND BEACH, FL 32174 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCDOUGAL, CARLA NAME NAME 104 GRADY DOVE COURT STREET ADDRESS STREET ADDRESS DAYTONA BEACH, FL 32119 CITY-ST-7IP CITY-ST-ZIP Delete ☐ Addition TITLE TITLE ☐ Change SPENCE, DONALD J MARKE NAME 108 S OCEAN AIRE TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORMOND BEACH, FL 32176 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition

**FILED** 

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

WINTERS, WES

510 OCEAN DUNES RD

DAYTONA BEACH, FL 32118

NAME

STREET ADDRESS CITY-ST-ZIP

Frances R. Burdick