

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90018 042 ****70.00

DOCUMENT # N95000004516	
1. Entity Name UNBELIEVABLE ACRES BOTANIC GARDENS, INC.	

Principal Place of Business 470 63RD TRAIL NORTH WEST PALM BEACH FL 33413-7019 US	Mailing Address 470 63RD TRAIL NORTH WEST PALM BEACH FL 33413-7019 US
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2. Principal Place of Business - No P.O. Box # 470 63rd Trail North	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State West Palm Beach FL	City & State
Zip 33413-7019	Country US

1st MOORE	CR2E037 (10/07)
4. FEI Number 65-0759367	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JOYNER, EUGENE A 470 63RD TRAIL NORTH WEST PALM BEACH FL 33413	
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7. Name and Address of New Registered Agent	
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

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD JOYNER, EUGENE A 470 63RD TRAIL NORTH WEST PALM BEACH FL 33413 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS PFENNINGER, PAUL 4085 FLORAL DRIVE WEST PALM BEACH FL 33436 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SAMPLE, JANE 1401 MEADOWBROOKE DR WEST PALM BEACH FL 33417 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCDANIEL, CHARLES 1880 CARANBALM RD LAKE CLARK SHORES FL 33406 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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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 Section 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.	
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SIGNATURE: Eugene Joyner Eugene Joyner 4/23/08 561 242-1686