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May 21 1998 8:00am
Secretary of State

N9

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

Old Name
Palm [redacted] Education / Palm-Net, Palm Beach County Environmental Education Network, Inc.
[redacted]

New Name

Principal Place of Business	Mailing Address
14152 Leeward Way Palm Beach Gardens, FL 33410	14152 Leeward Way Palm Beach Gardens, Fl 33410-1126

3. Date Incorporated or Qualified: 12/04/1996

4. FEI Number: 65 0712420 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 6301 Summit Blvd	26 6301 Summit Blvd
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: West Palm Beach FL	28 City & State: West Palm Beach FL
24 Zip: 33415 25 Country: USA	29 Zip: 33415 30 Country: USA

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
James Ostrander 14152 Leeward Way Palm Beach Gardens, FL 33410	81 Name: MARILYNN OPPER 82 Street Address (P.O. Box Number is Not Acceptable): 6301 Summit Blvd 83 84 City: West Palm Beach FL 85 Zip Code: 33415

11. Pursuant to the provisions of Sections 617.0502 and 617.1608, 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.

SIGNATURE: Marilynn Opper MARILYNN OPPER 4/15/98
Signature of new registered agent required (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, President Neill, Diane D. 18282 Oak Leaf Dr Jupiter, FL 33458 ☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Director, President Patricia Welch 6809 Hammock Lane West Palm Beach, FL 33411 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Member at Large Linda M. Johnston 836 Blueberry Dr Wellington FL 33414 ☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	Director, Vice President Steve Bass 1801 N. Ocean Blvd. Boca Raton, FL 33432 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Treasurer James H Ostrander 14152 Leeward Way Palm Beach Gardens, FL 33411 ☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	Director, Secretary Lynda M. Johnston 836 Blueberry Dr Wellington, FL 33414 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Vice President Bonnie F Tischler 92 Maple Crest Cir Jupiter FL 33458 ☒ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	Director, Treasurer marilynn Opper 14765 92nd Ct N West Palm Beach, FL 33412 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Secretary Susan D. Schenk 111 Santa Cruz Ave Royal Palm Beach, FL 33411 ☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director, Member at Large Sasha Linsen 910 9th Court Palm Beach Gardens, FL 33410 ☒ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 100002533351 -05/22/98--01050--052 ***61.25

CR2E037 (10/97)

14. 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 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: Marilynn Opper MARILYNN OPPER 4/15/98 561-790-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #