

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N97000006950

1. Entity Name
FLORIDA ENVIROTHON, INC.



Principal Place of Business
P.O. BOX 26
HOWEY IN THE HILLS, FL 34737

Mailing Address
P.O. BOX 26
HOWEY IN THE HILLS, FL 34737

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

JOHNSON, CAROL
23407 NEW HOPE LANE
HOWEY IN THE HILLS, FL 34737

03102007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0393961

Applied For
Not Applicable

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

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

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 May 1, 2007

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

TITLE T ☐ Delete
NAME HORNSBY, ART
STREET ADDRESS 9725 SW 129TH STREET
CITY-ST-ZIP ARCHER, FL 32618

TITLE ~~D~~ VC ☐ Delete
NAME LA MARTINA, KATHYRN
STREET ADDRESS 210 ATLANTA DRIVE
CITY-ST-ZIP STUART, FL 34994

TITLE D ☐ Delete
NAME STEWART, SHAUN
STREET ADDRESS 24059 CHILDS ROAD
CITY-ST-ZIP BROOKSVILLE, FL 34601

TITLE D ☐ Delete
NAME DAUGHERTY, STEPHANIE
STREET ADDRESS 416 WEST MAIN STREET
CITY-ST-ZIP TAVARES, FL 32778

TITLE D ☐ Delete
NAME BAKER, RICHARD
STREET ADDRESS 522 N BLUE ISLAND LANE
CITY-ST-ZIP SEBASTIAN, FL 32958

TITLE D ☐ Delete
NAME MESSLER, TERRI
STREET ADDRESS 9171 RAVINA ROAD
CITY-ST-ZIP TALLAHASSEE, FL 32309

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE C ☐ Change ☒ Addition
NAME CRAWLEY, PATRICIA
STREET ADDRESS 13483 NW 7th STREET
CITY-ST-ZIP SUNRISE, FL 33325-6159

TITLE D ☐ Change ☒ Addition
NAME JOHNSON, CAROL
STREET ADDRESS 23407 NEW HOPE LANE
CITY-ST-ZIP HOWEY IN THE HILLS, FL 34737

TITLE D ☐ Change ☒ Addition
NAME JACKIE BAKER
STREET ADDRESS 4505 George Blvd.
CITY-ST-ZIP Sebring, FL 33872

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Carol Johnson CAROL JOHNSON

3/15/07 3523243271

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #