2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N99000003294

Entity Name: THE FLOWERING TREE SOCIETY OF CENTRAL FLORIDA, INC,

Current Principal Place of Business:

926 PALM OAK DR
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 3067
ORLANDO, FL 328023067 US

New Mailing Address:

FEI Number: 59-3561808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNS, CAROLE S
926 PALM OAK DR
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	PRES	( ) Delete
Name:	DIEMER, MIKE	
Address:	119 E. LAUREL AVE	
City-St-Zip:	HOWEY IN THE HILLS, FL 34737	
Title:	VP	( ) Delete
Name:	DELLINGER, KEVIN	
Address:	2620 GRIFFIN RD	
City-St-Zip:	LEESBURG, FL 34748	
Title:	SEC	( ) Delete
Name:	HENLEY, LATANYA 1	
Address:	1983 WILLIAMS MANOR AVE	
City-St-Zip:	ORLANDO, FL 32811	
Title:	TREA	( ) Delete
Name:	JOHNS, CAROLE S	
Address:	926 PALM OAK DR	
City-St-Zip:	APOPKA, FL 32712	
Title:	D	( ) Delete
Name:	SULLIVAN, JOHN P	
Address:	1411 HAZELWOOD DR.	
City-St-Zip:	ORLANDO, FL 32806	
Title:	D	( ) Delete
Name:	STEBBINS, MARK	
Address:	1012 MANDARIN DR	
City-St-Zip:	PALM BAY, FL 32905	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SEC	(X) Change ( ) Addition
Name:	JULIE, IOOSS	
Address:	1206 W. COLUMBIA ST.	
City-St-Zip:	ORLANDO, FL 32805	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLE JOHNS TREA 04/18/2008

Electronic Signature of Signing Officer or Director — Date