

2000 UNIFORM BUSINESS REPORT (UBR)

5/30

FILED

Jun 19, 2000 8:00 am
Secretary of State

05-30-2000 90010 013 ****61.25

DOCUMENT # N99000006536

1. Entity Name

PALM AND CYCAD SOCIETIES OF FLORIDA, INC.

Principal Place of Business

Mailing Address

935 A HONEY TREE LN.
WELLINGTON FL 33414

935 A HONEY TREE LN.
WELLINGTON FL 33414-7935

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0976653

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYNES, JODY
9525 JAMAICA DR.
MIAMI FL 33189

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5 May 00

Date

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Delete
NAME	Paul Craft	
STREET ADDRESS	935 A Honey Tree Lane	
CITY-ST-ZIP	Wellington, FL 33414	
TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Tom Broome	
STREET ADDRESS	9128 Golden Gate Blvd.	
CITY-ST-ZIP	Polk City, FL 33868	
TITLE	Recording Secretary	<input type="checkbox"/> Delete
NAME	Bob Petersen	
STREET ADDRESS	2165 51st Terrace, SW.	
CITY-ST-ZIP	Naples, FL 34116	
TITLE	Corresponding Secretary	<input type="checkbox"/> Delete
NAME	Jody Haynes	
STREET ADDRESS	9525 Jamaica Dr.	
CITY-ST-ZIP	Miami, FL 33189-1709	
TITLE	Treasurer	<input type="checkbox"/> Delete
NAME	Geri Pratt	
STREET ADDRESS	328 SE 33rd Terrace	
CITY-ST-ZIP	Cape Coral, FL 33904-4835	
TITLE	Editor/Webmaster	<input type="checkbox"/> Delete
NAME	Jody Haynes	
STREET ADDRESS	9525 Jamaica Dr.	
CITY-ST-ZIP	Miami, FL 33189-1709	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Jody L. Haynes

5 May 00

Date

Daytime Phone #

CR2E037 (9/99)