

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007213

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: THE BROWARD CHAPTER OF THE FLORIDA NATIVE PLANT SOCIETY, INC.

**Current Principal Place of Business:**

5620 SW 88TH AVE  
FORT LAUDERDALE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5620 SW 88TH AVE  
FORT LAUDERDALE, FL 33328

**New Mailing Address:**

FEI Number: 65-0966597      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SCOTT, KIRK  
5620 SW 88TH AVE  
COOPER CITY, FL 33328      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: T      ( ) Delete  
Name: SCOTT, KIRK  
Address: 5620 SW 88TH AVE  
City-St-Zip: COOPER CITY, FL 33328

Title: VP      ( ) Delete  
Name: ROBERTS, BRYANT  
Address: 4400 SW 61ST AVE  
City-St-Zip: DAVIE, FL 33314

Title: P      ( ) Delete  
Name: YI, MARIANA  
Address: 8311 SW 57TH ST  
City-St-Zip: DAVIE, FL 33328

Title: S      ( ) Delete  
Name: SCOTT, KIRK  
Address: 5620 SW 88TH AVE  
City-St-Zip: COOPER CITY, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      (X) Change ( ) Addition  
Name: CHINCHILLA, SHARON  
Address: 4400 SW 61ST AVE  
City-St-Zip: DAVIE, FL 33314

Title: P      (X) Change ( ) Addition  
Name: TAYLOR, KAY  
Address: 5110 SW 196TH LANE  
City-St-Zip: SW RANCHES, FL 33332

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: KIRK SCOTT

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TREA

04/30/2009

\_\_\_\_\_  
Date