2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2022
Secretary of State
7814307972CC

DOCUMENT# N01000001078

Entity Name: THE FLORIDA WILDFLOWER FOUNDATION, INC.

Current Principal Place of Business:

1307 NOBLE PLACE
ORLANDO, FL 32801

Current Mailing Address:

PO BOX 941691
MAITLAND, FL 32801-4217 US

FEI Number: 59-3700304

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATRAZZO, STACEY
137 NOBLE PLACE
ORLANDO, FL 32801-4217 US

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: STACEY MATRAZZO 02/08/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY
Name	ZINN, TERRY
Address	27715 NW 107 STREET
City-State-Zip:	ALACHUA FL 32615

Title	VICE CHAIR
Name	DARDEN, ERIC
Address	12418 SCOTTISH PINE LN
City-State-Zip:	CLERMONT FL 34711

Title	DIRECTOR
Name	BISSETT, NANCY
Address	2929 JB CARTER RD
City-State-Zip:	DAVENPORT FL 33837

Title	DIRECTOR
Name	GOLDSTEIN, SARA
Address	1576 PALM AVE
City-State-Zip:	FT MYERS FL 33916

Title	TREASURER
Name	MARISSA, KAPROW
Address	931 WEDGEWOOD DRIVE
City-State-Zip:	WINTER SPRINGS FL 32708

Title	CHAIR
Name	CASTER, JEFF
Address	712 BRIARCREEK RD
City-State-Zip:	TALLAHASSEE FL 32312

Title	DIRECTOR
Name	ELKOTT, FATIMA
Address	1830 GREYSTONE HEIGHTS DR
City-State-Zip:	VALRICO FL 33594

Title	DIRECTOR
Name	HENRY, JEFF
Address	2328 VIRGINIA PLACE NE 30305
City-State-Zip:	ATLANTA GA 30305

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I hereby 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 all other like empowered.

SIGNATURE: STACEY MATRAZZO EXECUTIVE DIRECTOR 02/08/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HUNT, MELISSA
Address 807 VASSAR ST APT B
City-State-Zip: ORLANDO FL

Title DIRECTOR
Name PRICE, DAVID
Address 813 CAMPBELL AVE
City-State-Zip: LAKE WALES FL 33835

Title DIRECTOR
Name SCHAAG, CAROLYN
Address 22125 DRAW BRIDGE DR
City-State-Zip: LEESBURG FL 34748

Title EXECUTIVE DIRECTOR
Name MATRAZZO, STACEY
Address 1307 NOBLE PLACE
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name MACKAY, ANNE
Address 120 50 E HIGHWAY 25
City-State-Zip: OCKLAWAHA FL 32179

Title DIRECTOR
Name RUSSELL, MARK
Address 16225 ARROWHEAD TRAIL
City-State-Zip: CLERMONT FL 34711

Title DIRECTOR
Name SMITH, KODY
Address 901 YATES ST
City-State-Zip: ORLANDO FL 32084