

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000008623

**FILED**  
**Apr 29, 2021**  
**Secretary of State**  
**5857011830CC**

**Entity Name:** AMERICAN COUNCIL FOR MEDICINALLY ACTIVE PLANTS, INC.

**Current Principal Place of Business:**

3005 KNOX MCRAE DRIVE  
C/O DR. GARY W. STUTTE  
TITUSVILLE, FL 32780

**Current Mailing Address:**

3005 KNOX MCRAE DRIVE  
C/O DR. GARY W. STUTTE  
TITUSVILLE, FL 32780 US

**FEI Number:** 27-0651663

**Certificate of Status Desired:** Yes

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

STUTTE, GARY W.  
3005 KNOX MCRAE DRIVE  
TITUSVILLE, FL 32780 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:** GARY W STUTTE

04/29/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name BASU, CHHANDAK PHD  
Address CALIFORNIA STATE UNIVERSITY  
City-State-Zip: NORTHRIDGE CA 91330

Title TREASURER  
Name LEE, SUN-OK PHD  
Address UNIVERSITY OF ARKANSAS  
City-State-Zip: FAYETTEVILLE AR 72701

Title EXECUTIVE DIRECTOR  
Name MEDINA-BOLIVAR, FABRICIO PHD  
Address ARKANSAS STATE UNIVERSITY  
City-State-Zip: JONESBORO AR 72401

Title PRESIDENT  
Name LEVENSON, ANAIT S. DR.  
Address LONG ISLAND UNIVERSITY  
City-State-Zip: BROOKVILLE NY 11548

Title VP  
Name KELLOGG, JOSHUA PHD  
Address PENNSYLVANIA STATE UNIVERSITY  
City-State-Zip: STATE COLLEGE PA 16801

Title MEMBER AT LARGE  
Name JOSHEE, NIRMAL  
Address FORT VALLEY STATE UNIVERSITY  
City-State-Zip: FORT VALLLEY GA 31030

Title MEMBER AT LARGE  
Name ARUN, ALOK  
Address INTER AMERICAN UNIVERSITY OF  
PUERTO RICO  
City-State-Zip: BARRANQUITAS, PUERTO RICO OC  
00794

Title MEMBER AT LARGE  
Name DOSEFF, ANDREA  
Address MICHIGAN STATE UNIVERSITY  
City-State-Zip: EAST LANSING MI 48824

*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:** FABRICIO MEDINA-BOLIVAR

**EXECUTIVE DIRECTOR**

04/29/2021

Electronic Signature of Signing Officer/Director Detail

Date