

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002035

**Entity Name:** FLORIDA NATIVE PLANT SOCIETY PINE LILY CHAPTER, INC.

**FILED**  
**Apr 10, 2024**  
**Secretary of State**  
**8313486032CC**

**Current Principal Place of Business:**

4701 OLD CANOE CREEK ROAD,  
#702169  
SAINT CLOUD, FL 34770-2169

**Current Mailing Address:**

4701 OLD CANOE CREEK ROAD  
POST OFFICE BOX 702169  
SAINT CLOUD, FL 34769 US

**FEI Number: 32-0567369**

**Certificate of Status Desired: No**

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

VEAUDRY, KARIENA  
2228 JESSICA LANE  
KISSIMMEE, FL 34744 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:** KARIENA VEAUDRY

04/10/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ADAMS, JENNIFER  
Address 5106 CHELWYN COURT  
City-State-Zip: ORLANDO FL 32837

Title DIRECTOR  
Name VEAUDRY, KARIENA  
Address 2228 JESSICA LANE  
City-State-Zip: KISSIMMEE FL 34744

Title S  
Name CHIVERS, MARIE  
Address 1603 REGAL OAK DRIVE  
City-State-Zip: KISSIMMEE FL 34744

Title T  
Name FIGUEROA, TAYLER  
Address 20 ADAMS AVENUE  
City-State-Zip: KISSIMMEE FL 34744

*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:** KARIENA VEAUDRY

**TREASURER**

04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date