

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002057

Entity Name: PALMA SOLA BOTANICAL PARK FOUNDATION, INC.**Current Principal Place of Business:**9800 17TH AVE N.W.
BRADENTON, FL 34209**Current Mailing Address:**PO BOX 14214
BRADENTON, FL 34280**FEI Number:** 65-0548069**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALMA SOLA BOTANICAL PARK
9800 17TH AVE N.W.
BRADENTON, FL 34209 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:** NICK BADEN

04/23/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name ORGERON, ERICA
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title VP
Name JASTER, MICHAEL
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title DIR
Name ELLEN, MESSMER
Address 9303 9TH AVE. NW
City-State-Zip: BRADENTON FL 34209

Title DIR
Name FRITZMEIER, JANICE
Address 9020 9TH STREET N.W.
City-State-Zip: BRADENTON FL 34209

Title DIRECTOR
Name LOUGH, KIMBERLEY
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title DIRECTOR
Name REVARD, ALICE
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title TREASURER
Name HUROWITZ, MELVIN
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title SECRETARY
Name GERALDSON, REBECCA
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

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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: EARL BADEN**DIRECTOR**

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BUSKIRK, EMILY
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title DIRECTOR
Name BADEN, EARL
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280

Title DIRECTOR
Name LINNANE, JAMIE
Address PO BOX 14214
City-State-Zip: BRADENTON FL 34280