2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004 8:00 am
Secretary of State
04-15-2004 90004 041 ****61.25

DOCUMENT # 802200

1. Entity Name
THE BOK TOWER GARDENS FOUNDATION, INC.

5403341U

Principal Place of Business	Mailing Address
BOK TOWER GARDENS 1151 TOWER BLVD LAKE WALES, FL 33853-3412 US	BOK TOWER GARDENS 1151 TOWER BLVD LAKE WALES, FL 33853-3412 US

01052004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-1352009 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SULLIVAN, ROBERT P
1151 TOWER BLVD.
LAKE WALES, FL 33853

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COB HUNT, FRANK M II 2404 SE HUNT BROS ROAD LAKE WALES, FL 33859	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COB BRYAN, J. F. IV ONE INDEPENDENT SQUARE #3201 JACKSONVILLE, FL 32202	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THAYER, A. BRONSON 2202 N. WESTSHORE BLVD. #150 TAMPA, FL 33607	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SULLIVAN, ROBERT P 1151 TOWER BOULEVARD LAKE WALES, FL 33853	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST NANCE, PAULA M 1151 TOWER BLVD LAKE WALES, FL 33853	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AST JOLLEY, STEVE 1151 TOWER BLVD LAKE WALES, FL 33853	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HALL, M. LEWIS JR 25 SE 2ND AVE-#1105 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD NEWTON, JOAN W 121 W. FORSYTH ST-#200 JACKSONVILLE, FL 32202	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT P. SULLIVAN Robert P. Sullivan 4/8/04 863-676-1408
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #