

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004638

FILED
Apr 16, 2009
Secretary of State

Entity Name: FRIENDS OF ST. JOSEPH STATE PARKS, INC.

Current Principal Place of Business:

PO BOX 1285
PORT SAINT JOE, FL 32457

New Principal Place of Business:

8899 CAPE SAN BLAS ROAD
PORT SAINT JOE, FL 32456

Current Mailing Address:

9574 CAPE SAN BLAS ROAD
PORT ST. JOE, FL 32456

New Mailing Address:

PO BOX 1285
PORT ST. JOE, FL 32457

FEI Number: 51-0586123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAHAN, CHRISTINA S
980 CAPE SAN BLAS ROAD
PORT ST. JOE, FL 32456 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CAREY, SANDRA B
Address: 140 CATAMARAN DR
City-St-Zip: PORT SAINT JOE, FL 32456

Title: D () Delete
Name: HARRIS, PATRICIA
Address: 4150 DIPLOMACY CIRLCE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: VAN VLEET, DEBRA K
Address: 775 CAPE SAN BLAS ROAD
City-St-Zip: PORT ST. JOE, FL 32456

Title: D () Delete
Name: HARRIS, FRED F
Address: 4150 DIPLOMACY CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD () Delete
Name: FRANZEN, PATRICIA
Address: 163 BETTY DRIVE
City-St-Zip: PORT SAINT JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: GERALD, LINDA
Address: 189 CORDGRASS WAY
City-St-Zip: PORT SAINT JOE, FL 32456

Title: V (X) Change () Addition
Name: DIAZ, MARTHA
Address: 8899 CAPE SAN BLAS ROAD/POST OFF. BOX 662
City-St-Zip: PORT SAINT JOE, FL 32457

Title: T (X) Change () Addition
Name: VAN VLEET, DEBRA K
Address: 775 CAPE SAN BLAS ROAD
City-St-Zip: PORT ST. JOE, FL 32456

Title: D (X) Change () Addition
Name: GERALD, BUDDY
Address: 189 CORDGRASS WAY
City-St-Zip: PORT SAINT JOE, FL 32456

Title: D (X) Change () Addition
Name: WHEALTON, STEVE
Address: 215 NINTH STREET
City-St-Zip: PORT SAINT JOE, FL 32456

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEBRA K. VANVLEET

T

04/16/2009

Electronic Signature of Signing Officer or Director

Date