1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(0)

FRIENDS OF O'LENO, INC.

APPROVED AND FILED

1998 ATR 17 AN 8: 53

SECHERALY OF STATE W.LLAMASSTE, FLORIDA

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Principal Plac	ace of Business Mailing Address				•		I SOULSTON BIO SINCE INCO	JOHOL DILLI L		OLI BILGI UTUK					
OLENO STATE PARK P.O. BOX 2879 RT 2 BOX 1010 20204 N.W. 184 TERRAL HIGH SPRINGS FL 32643 HIGH SPRINGS FL 32643							e Incorporated or Q 12/29/1988 Number	ualified			Annla	d Fa-			
US							NOT APPLICA	RIF			Applied Not Ap	plicable			
2. Principal P	2. Principal Place of Business 2a. Mailing Address P. 0. Box 2879							ificate of Status De			\$8.75	<u>-</u>	·		
21 26			019			o. Cen	incate of Status De	sirea		•	Requir	1			
Suite, Apt. #, etc.						_ [•		tion Campaign Fina	•	_	\$5.00				
27								t Fund Contribution				to Fee	98		
23 Ligh Springs,				, FL	F L S this nonprofit corporation a homeowners association?						İ				
Zip		Country		Z ip	Ť	Country		8. This corporation owes or has paid the current year Intangible							ble
24	25			2655	30	USA				onal Property Tax o			Yes	☐ No	
	9, Name an	d Address of Curre	nt Regist	ered Agent				10. Name and Address of New Registered Agent							
W=11=0(4), 4.1.				81	Name										
KENDRICK, DALE				82	Street	Address	(P.O. B	lox Number is Not /	Acceptab	le)					
RT. 2 BOX 1010 HIGH SPRINGS FL 32643			63												
INGILOT	1111001102	.010								···					
						84	City					FL	85 Zi	p Code	•
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Floride Statutes, the above-named corporation submits this statement for the purpose of change							fichanging	its reç	gistered						
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointme agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								as regis	stered						
SIGNATURE STATE SIGNATURE								98							
12.	Signature, typed or p	rinted name of registered age OFFICERS AN				islared Age	eni signature	required wh		iling) FIONS/CHANGES T	O OFFIC	DATE FRS AND	DIRECTO	DRS IN	12
TITLE	\$D		2 220	☐ DE		1.1 TITLE					0 01110	LITO AITE	Change		Addition
NAME	HUNT, CAR	ROL				1.2 NAME				Carol			-		
STREET ADDRESS	RT. 1 BOX					1.3 STREET	ADDRESS			ox 3495					
CITY-ST-ZIP	FT. WHITE	FL 32038				1.4 CITY - S	T- 71P	Ft	Whi.	te, FL 32	038				
TITLE	PD			☐ DE	LETE	2.1 TITLE		20.4		0 -f 4 - T	. 10	-	Change Ch		Addition
NAME		, JAMES P.				2.2 NAME				ldt, James E 40 ST	γ.				
STREET ADDRESS	7730 NE 44 HIGH SPRI					2.3 STREET				E 4 0 ST		2/12			
CITY-ST-ZIP TITLE	VD VD	NOS FL		□ D€		2.4 CITY - S 3.1 TITLE	ST-ZIP	плу	n > 1	prings, F	L J	2043	≥ Change		Addition
NAME	UNDERMAI	N DOYLE			T.	3.2 NAME		lin	doni	man. Doul	0		E CHAIR		Audilion
STREET ADDRESS	20204 NW	•				3.3 STREET	ADDRESS	P.	0.	man, Doyl Box 1058	ו/א ``	4			i
City-ST-ZIP	HIGH SPRI				1	3.4. CITY - S		Ala			L 32	2615			
TITLE	TD			D€		4.1 TITLE	71 2.11						⊠ Change		Addition
NAME	WALSH, HA	Arriet A.				4. 2 NAME				Harriet	Α.				
STREET ADDRESS	7730 NE 1					4.3 STREET	ADDRESS			E 40 St. prings, F	1 20	112			
CITY-ST-ZIP	HIGH SPRI	NGS FL				4.4 CITY - S	T- Ž IP	плу	$n \rightarrow p$	orknys, r	L 32	043			
TITLE	D	HOME		☐ DE		5.1 TITLE							Change		Addition
NAME	HAWKINS,					5.2 NAME									
STREET ADDRESS	FT WHITE I					5.3 STREET		r.	10 1. 2	+	0020				1
CITY-ST-ZIP TITLE	VD WHILE			☐ DE		5.4 CITY - ST 6.1 TITLE	i - ZIP	トモ	wnx	te, FL 32	<i>U38</i>		Change		Addition
NAME	PIPER, DOI	NAL				6.2 NAME		nt	A #	Dancod			TEN CHAIRT	لسا	- Auton
STREET ADDRESS	2197 DENT					6.3 STREET	ADDRESS	rlp	er,	Donald					
Officer 700	VIII EE EI					a comment		Vnl	00	FI 32097	· /		.17.1	O	- 1

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an eddress.





Department of Environmental Protection

Lawton Chiles
Governor

Marjory Stoneman Douglas Building 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

Virginia B. Wetherell Secretary

April 13, 1998

Mr. David Mann, Director Division of Corporations Department of State Post Office Box 6327 Tallahassee, FL 32314

Dear Mr. Mann:

This letter is to certify to you that Friends of O'Leno, Inc., is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S.

Sincerely,

Fran P. Mainella, CLP

Director

Division of Recreation and Parks

FPM/paw Attachments