

FILE NOW: FILING FEE IS \$61.25.

APPROVED
AND
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99 FEB -5 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

001261

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N29957

1. Corporation Name
FRIENDS OF O'LENO, INC.

Principal Place of Business OLENO STATE PARK RT 2 BOX 1010 HIGH SPRINGS FL 32643 US	Mailing Address P.O. BOX 2879 HIGH SPRINGS FL 32655
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	12/29/1988
22 City & State	27 City & State	4. FEI Number
23 Zip Country	28 Zip Country	NOT APPLICABLE
24	29	Applied For
		Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KENDRICK, DALE RT. 2 BOX 1010 HIGH SPRINGS FL 32643	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code
	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 appointment as registered agent. I am familiar with, and accept the obligation of, Section 617.0503, Florida Statutes.

SIGNATURE: *Dale Kendrick* DATE: 1/24/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD HUNT, CAROL <input checked="" type="checkbox"/> DELETE	11 TITLE	SD <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUNT, CAROL	12 NAME	Nan Soistman
STREET ADDRESS	RT. 1 BOX 3495	13 STREET ADDRESS	11301 NW 120 Terrace
CITY-ST-ZIP	FT. WHITE FL 32038	14 CITY-ST-ZIP	Alachua, FL 32615
TITLE	PD ROTHFEDT, JAMES P <input type="checkbox"/> DELETE	21 TITLE	ROTHFELDT, JAMES P. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROTHFEDT, JAMES P	22 NAME	
STREET ADDRESS	7730 NE 40 ST	23 STREET ADDRESS	
CITY-ST-ZIP	HIGH SPRINGS FL 32643	24 CITY-ST-ZIP	
TITLE	VD LINDERMAN, DOYLE <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDERMAN, DOYLE	32 NAME	
STREET ADDRESS	P.O. BOX 1058 N/A	33 STREET ADDRESS	
CITY-ST-ZIP	ALACHUA FL 32615	34 CITY-ST-ZIP	
TITLE	TD WALSH, HARRIET A <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALSH, HARRIET A	42 NAME	
STREET ADDRESS	7730 NE 40 ST.	43 STREET ADDRESS	
CITY-ST-ZIP	HIGH SPRINGS FL 32643	44 CITY-ST-ZIP	
TITLE	D HAWKINS, JACKIE <input checked="" type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAWKINS, JACKIE	52 NAME	
STREET ADDRESS	RT 1 BOX 3505	53 STREET ADDRESS	
CITY-ST-ZIP	FT WHITE FL 32038	54 CITY-ST-ZIP	
TITLE	VD PIPER, DONALD <input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIPER, DONALD	62 NAME	
STREET ADDRESS	2197 DENTON DR.	63 STREET ADDRESS	
CITY-ST-ZIP	YULEE FL 32097	64 CITY-ST-ZIP	

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 address, with all other like empowered.

SIGNATURE: *James P. Rothfeldt* DATE: 01-24-99 (904) 457-4806

CR2E037 (1/198)



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

February 2, 1999

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 the 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