


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000005815
 1. Entity Name
MOUNT DORA FRIENDS OF THE ENVIRONMENT, INC.



Principal Place of Business Mailing Address
P.O. BOX 1253 **P.O. BOX 1253**
MOUNT DORA, FL 32756-1253 **MOUNT DORA, FL 32756-1253**



01102005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-3327084 Not Applicable

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

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6. Name and Address of Current Registered Agent
BURR, ANDREA
408 N TREMAIN STREET
MOUNT DORA, FL 32757

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

Filing Fee is \$61.25
Due by May 1, 2005

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

000000255103
 03/07/05-80100-011 61.25

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD SHELLEY, DONNA S 423 E 7TH AVENUE MOUNT DORA, FL 32757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD BURR-YATSUK, ANDREA L 206 EAST NINTH AVE. MOUNT DORA, FL 32757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD FORBES, ELIZABETH A 100 S. TREMAIN ST, E-3 MOUNT DORA, FL 32757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD RINGER, ROBERT K 625 HIGH POINT DRIVE MOUNT DORA, FL 32757 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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: *Elizabeth A. Forbes* **Elizabeth A. Forbes, Treasurer** **March 3, 2005** **(352) 383-4198**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #