

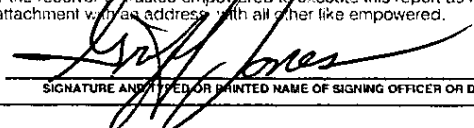


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000005503 1. Entity Name FRIENDS OF DUDLEY FARM, INC.						04 MAR 23 PM 5:50 TALLAHASSEE, FLORIDA	
Principal Place of Business 3509 NW 53RD TERRACE GAINESVILLE, FL 32606				Mailing Address 3509 NW 53RD TERRACE GAINESVILLE, FL 32606			
2. Principal Place of Business		3. Mailing Address				03032004 Chg-NP CR2E037 (10/03)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country		Zip		Country	
4. FEI Number 59-3470681				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
DAVIS, DON L 3509 NW 53RD TERRACE GAINESVILLE, FL 32606				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 _____ DATE _____ <small>Signature of person named in registered office and then applied for (NOTE: Registered Agent signature required when changing)</small>							
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	V	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DAVIS, DON L			NAME			
STREET ADDRESS	3509 NW 53RD TERRACE			STREET ADDRESS			
CITY, ST, ZIP	GAINESVILLE, FL 32606			CITY, ST, ZIP			
TITLE	SD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MCINTOSH, NANCY J			NAME			
STREET ADDRESS	306 NW 180TH STREET			STREET ADDRESS			
CITY, ST, ZIP	NEWBERRY, FL 32669			CITY, ST, ZIP			
TITLE	VD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CUMBEE, CARROLL			NAME			
STREET ADDRESS	P.O. BOX 482			STREET ADDRESS			
CITY, ST, ZIP	NEWBERRY, FL 32669			CITY, ST, ZIP			
TITLE	PD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BROWN, BILL			NAME			
STREET ADDRESS	P.O. BOX 484			STREET ADDRESS			
CITY, ST, ZIP	NEWBERRY, FL 32669			CITY, ST, ZIP			
TITLE	TD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	JONES, GRIFF			NAME			
STREET ADDRESS	621 NW 182ND STREET			STREET ADDRESS			
CITY, ST, ZIP	NEWBERRY, FL 32669			CITY, ST, ZIP			
TITLE	V	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HAIR, ANNE			NAME			
STREET ADDRESS	21105 NW 46TH AVENUE			STREET ADDRESS			
CITY, ST, ZIP	NEWBERRY, FL 32669			CITY, ST, ZIP			
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: 				SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

March 26, 2004

Mr. Sean Toner
Division of Corporations
Florida Department of State
409 East Gaines Street
Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to certify to you that the Friends of Dudley Farm, 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. Pursuant to F.S. 617.0122, this filing is exempt from any fees when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 245-3098.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/pwf

Attachments