Applied For

Not Applicable

## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9800006036

1. Corporation Name

FRIENDS OF GOOSE POND, INC.

Principal Place of Business

2. Principal Place of Business

2435 POTTS RD. TALLAHASSEE FL 32308

Suite, Apt. #, etc.

Mailing Address

2435 POTTS RD.

2a. Mailing Address

Suite, Apt. #, etc.

26

TALLAHASSEE FL 32308

## **FILED** Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90014 029 \*\*\*\*61.25



3. Date Incorporated or Qualifed

59-3545267

10/22/1998

4. FEI Number

City & State    City & State   City & State   28   29   29   29   29   39   50   50   50   50   50   50   50   5	22		27						<i>5</i> 9 ~35452	161			Not	Applicable
Zip   Country   Zip   Country   Zip   Country   St. Election Campaign Financing   S.5, 00 May Bo   Added to Fees   St.   Name and Address of Current Registered Agent   St.   Name and Address of New Registered Agent   St.   Name   St.   Name and Address of New Registered Agent   St.   Name and Address   Name agent   Name and Address   Name a	City & State	e		City & State					5. Certificate of Status De	esired []				
9. Name and Address of Current Registered Agent    10. Name and Address of New Registered Agent	Zip	Country Zip				¬ '			1 -	· · · · · · · · · · · · · · · · · · ·				
RUMENIK, DOROTHY 2435 POTTS RD. TALLAHASSEE FL 32308  82 Street Address (P.O. Box Number is Not Acceptable)  83 TALLAHASSEE FL 32308  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sactions 617,0502 and 617,1508, Florida Statutes, the evolute-stander of composition or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 817,0502, Florida Statutes.  11. Pursuant to the provisions of Sactions 617,0502 and 617,1508, Florida Statutes, the evolutes of the composition of the provisions of the section 817,0502, Florida Statutes.  11. Pursuant to the provisions of Sactions 617,0502 and 617,1508, Florida Statutes, the evolutes of the section 817,0502, Florida Statutes.  12. Or Florida Statutes.  12. Or Florida Statutes.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TITLE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TITLE  15. TALLAHASSEE FL 32308  14. GITN-37-2P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TREET ADDRESS  16. GITN-37-2P  17. TALLAHASSEE FL 32308  16. GITN-37-2P  17. TALLAHASSEE FL 32308  17. TALLAHASSEE FL 32308  18. TALLAHASSEE FL 32308  19. TALLAHASSEE FL 32308  19. TALLAHASSEE FL 32312  10. DELETE  10. TITLE  10. DELETE  10. TITLE  10. Change  10.	24]			tornd Agent	30	'1					ered A		Jeu IO	1 663
RUMENIK, DOROTHY 2435 POTTS RD. TALLAHASSEE FL 32308  84		9. Name and Address of Curre	nt Kegis	stered Agent		81	Nam	 e	10. Name and Address (	n idem icegisu	orou A	your		
2435 POTTS RD. TALLAHASSEE FL 32308  84 City FL 85 Zip Code  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 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 and accept the oligidations of, Section 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and agent and accept the oligidations of, Section 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the oligidations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and services and accept the oligidations of, Section 617,0503, Point of Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and services and services and services agent and services and services and services agent and services and servi														
TALLAHASSEE FL 32308    84						82	Stree	t Addres	ss (P.O. Box Number is Not	Acceptable)				
### City						83	<del> </del>							
1. 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 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, 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, 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, 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, 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, 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, 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, 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, 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, or both in the State of Florida Statutes, the appointment as registered agent, or both in the State of Grands State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Grands	TALLAHAS	SSEE FL 32308												
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Signature, hyear or printed rame of regulatered agent and tills if applicables   (NOTE: Reputative degree of when installating)   DATE	office or r	egistered agent, or both, in the State	of Florid	da. Such chan	ge was a⊍thi	orized by t	the co	d corpor poration	ration submits this statemen is board of directors. I here	it for the purpos by accept the a	se of ch appoints	nangin ment a	g its regi	egistered stered
TITLE DP DELETE 1.1TITLE	SIGNATURE	Signature, typed or printed name of registered age	ent and title	if applicable.	(NOTE: Re	gistered Agen	t signatu	e required w	when reinstating)	DAT	ΓE			
STRAUSS, PATRICK M   12 NAME   13 STREET ADDRESS   2005 DOGWOOD HILL   13 STREET ADDRESS   14 CITY-ST-ZIP   TALLAHASSEE FL 32308   14 CITY-ST-ZIP     Change   Addition   Addi	12.					13.			ADDITIONS/CHANGES	TO OFFICER	S AND	DIRE	CTOR	S IN 12
STREET ADDRESS   CITY-ST-ZIP	TITLE	DP		□ D	ELETE	1.1 TITLE						Cha	nge	☐ Addition
TALLAHASSEE FL 32308	NAME	STRAUSS, PATRICK M				1.2 NAME		-						
TITLE	STREET ADDRESS					1.3 STREET	ADDRES	s						
NAME	CITY-ST-ZIP	TALLAHASSEE FL 32308				1.4 CITY-\$T	r-ZIP	l						
STREET ADDRESS   2435 POTTS RD.   23 STREET ADDRESS   24 CITY-ST-ZIP	TITLE	DS			ELETE	2.1 TITLE						☐ Cha	nge	☐ Addition
STREET ADDRESS   2435 POTTS RD.   23 STREET ADDRESS   24 CITY-ST-ZIP	NAME	RUMENIK, DOROTHY				2.2 NAME								
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MAME	CITY-ST-ZIP	TALLAHASSEE FL 32308				2. 4 CITY-S	T-ZIP							٠.
STREET ADDRESS	TITLE	DT		D	ELETE	3.1 TITLE		T .				☐ Cha	nge	Addition
TALLAHASSEE FL 32312   3.4 CITY-ST-ZIP	NAME	HANNA, MARLENE C				3.2 NAME		-						
TITLE         DELETE         4.3 TITLE         Change         Addition           NAME         4.2 NAME         4.3 STREET ADDRESS         4.4 CITY-ST-ZIP         TITLE         Change         Addition           NAME         5.1 TITLE         Change         Addition           NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         Change         Addition           TITLE         DELETE         5.4 CITY-ST-ZIP         Change         Addition           NAME         6.1 TITLE         Change         Addition           NAME         6.2 NAME         CTTY-ST-ZIP         CHange         Addition           NAME         6.2 NAME         CTTY-ST-ZIP         CTTY-ST-	STREET ADDRESS	1752 MARSTON PL.				3.3 STREET	ADDRES	s						,
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A4 CITY-ST-ZIP	NAME					4. 2 NAME								
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         52 NAME         5.3 STREET ADDRESS         CITY-ST-ZIP         5.4 CITY-ST-ZIP         Change         Addition           TITLE         DELETE         6.1 TITLE         Change         Addition           NAME         6.2 NAME         CITY-ST-ZIP         CITY-ST-ZIP         CITY-ST-ZIP	STREET ADDRESS					4.3 STREET	ADDRES	s						
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STREET ADDRESS	TITLE				ELETE			]				☐ Cha	nge	☐ Addition
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UIT-51-2P	STREET ADORESS							S						
	CITY-ST-ZIP								// 14A 07/0/// FI : 1 C			. 45 - 1	L . !	

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: