

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740849

**FILED**  
**Feb 12, 2020**  
**Secretary of State**  
**6143445907CC**

**Entity Name:** FLORIDA OUTDOOR WRITERS ASSOCIATION, INC.

**Current Principal Place of Business:**

235 APOLLO BEACH BLVD.  
UNIT 271  
APOLLO BEACH, FL 33572

**Current Mailing Address:**

235 APOLLO BEACH BLVD.  
UNIT 271  
APOLLO BEACH, FL 33572 US

**FEI Number:** 59-2190309

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BARKER, KATHLEEN  
3912 W HORATIO STREET  
TAMPA, FL 33609 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            EDC  
Name            NEWELL, BUTCH  
Address        235 APOLLO BEACH BLVD.  
                  UNIT 271  
City-State-Zip: APOLLO BEACH FL 33572  
  
Title            1VP  
Name            HARBSTER, DESIREE  
Address        140 ELLISON AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title            PRES  
Name            HUBER, JENNIFER  
Address        3771 PARKINS TERRACE  
City-State-Zip: NORTH PORT FL 34286  
  
Title            S  
Name            BARKER, KATHY  
Address        3912 W. HORATIO ST.  
City-State-Zip: TAMPA FL 33609

Title            T  
Name            WATTENDORF, ROBERT  
Address        8089 ARCHER CIRCLE  
City-State-Zip: TALLAHASSEE FL 32309

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** BUTCH NEWELL

**ED**

**02/12/2020**

Electronic Signature of Signing Officer/Director Detail

Date