

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763321

Entity Name: THE FLORIDA RECREATION AND PARK ASSOCIATION, INC.**Current Principal Place of Business:**411 OFFICE PLAZA DR
TALLAHASSEE, FL 32301-2756**Current Mailing Address:**411 OFFICE PLAZA DR
TALLAHASSEE, FL 32301-2756 US**FEI Number:** 23-7413123**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WARMACK, ELEANOR J
411 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301-2756 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	PAST PRESIDENT
Name	SMITH, ELAINE
Address	12140 RANDEE ROAD
City-State-Zip:	NEW PORT RICHEY FL 34654

Title	VP
Name	VAILLANCOURT KREIDER, LUCILLE
Address	6700 CLARK ROAD
City-State-Zip:	SARASOTA FL 34241

Title	PRESIDENT
Name	PEEBLES, GINA
Address	111 SE 25 AVENUE
City-State-Zip:	OCALA FL 34471

Title	ED
Name	WARMACK, ELEANOR J
Address	411 OFFICE PLAZA DR.
City-State-Zip:	TALLAHASSEE FL 32301-2756

Title	PRESIDENT ELECT
Name	BYRNE, JOAN
Address	700 STARKEY ROAD #1101
City-State-Zip:	LARGO FL 33771

Title	VP
Name	GOBERNA, LINDA
Address	201 N 73 TERRACE
City-State-Zip:	HOLLYWOOD FL 33024

Title	VP
Name	COX, STEVE
Address	3410 PALM BEACH BLVD.
City-State-Zip:	FT. MYERS FL 33916

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: ELEANOR J WARMACK**EXECUTIVE DIRECTOR****01/07/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date