2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002449

Entity Name: FRIENDS OF LINCOLNVILLE, INC.

Current Principal Place of Business:

102 M L KING AVENUE ST. AUGUSTINE. FL 32084

Current Mailing Address:

102 M L KING AVENUE ST. AUGUSTINE. FL 32084 US

FEI Number: 03-0487824

31. A00031INL, 1L 32004 03

Name and Address of Current Registered Agent:

PHILLIPS, FLOYD 259 PINTORESCO DR ST. AUGUSTINE, FL 32095 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: FLOYD PHILLIPS 06/30/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

TitleDIRECTORTitleDIRECTORNameMASON, OTISNameWHITE, HENRY

Address 13 CHRISTOPHER STREET Address 848 WHITE EAGLE CIRCLE

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: SAINT AUGUSTINE FL 32086

Title DIRECTOR/TREASURER Title DIRECTOR

NameSTROMAN, DAVIDNameSTROMAN, MARYAddress882 W 3RD STREETAddress882 W 3RD STREET

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: SAINT AUGUSTINE FL 32084

Title PRESIDENT, DIRECTOR Title **DIRECTOR** Name PHILLIPS, FLOYD WHITE, VIOLA Name Address 259 PINTORESCO DR 848 WHITE EAGLE CIR Address City-State-Zip: ST. AUGUSTINE FL 32095 ST. AUGUSTINE FL 32086 City-State-Zip:

Title DIRECTOR Title VP, DIRECTOR
Name ISRAEL, DOROTHY Name PERRY, BEN

Address 850 A1A BEACH BLVD Address 432 MARIBELLA COURT

#82 City-State-Zip: ST. AUGUSTINE FL 32086 City-State-Zip: ST. AUGUSTINE FL 32080

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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: FLOYD PHILLIPS PRESIDENT 06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jun 30, 2020

Secretary of State

6934814415CC

Date

Certificate of Status Desired: No

Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

Name AGRESTA, SUE SECRETARY Name PARKS, SANDRA A

Address 168 ONEIDA STREET Address 71 VALENCIA ST

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32084