2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2018
Secretary of State
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Entity Name: FRIENDS OF THE ASA WRIGHT NATURE CENTRE, INC.

Current Principal Place of Business:

2601 BURLINGTON AVE N
SAINT PETERSBURG, FL 33713

Current Mailing Address:

2601 BURLINGTON AVE N
SAINT PETERSBURG, FL 33713 US

FEI Number: 01-0832520

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLITENICK, RICHARD MESQ.
1009 SIMONTON ST.
KEY WEST, FL 33040 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	DIRECTOR, TREASURER
Name	THOMAS, ROBERT A DR.
Address	6363 ST. CHARLES AVE.
City-State-Zip:	NEW ORLEANS LA 70118-6195

Title	DIRECTOR
Name	JAMES, CAROL DR.
Address	4 COCRICO ST. SAMAAN GARDENS, TRINCITY
City-State-Zip:	TRINIDAD & TOBAGO WI

Title	DIRECTOR, PRESIDENT
Name	BUECHERT, COURTNEY
Address	433 REDWOOD AVE
City-State-Zip:	CORTE MADERA CA 94925

Title	DIRECTOR
Name	WHITE, GRAHAM
Address	106 EASTERN MAIN ROAD
City-State-Zip:	TACARIGUA

Title	DIRECTOR
Name	GOBIN, JUDITH DR.
Address	1 HILLOCK DR, BLUE RANGE, DIEGO MARTIN
City-State-Zip:	TRINIDAD & TOBAGO, WI

Title	DIRECTOR, SECRETARY
Name	SCHAEFFER, PHILIP
Address	2601 BURLINGTON AVE N
City-State-Zip:	SAINT PETERSBURG FL 33713

Title	DIRECTOR
Name	MCREYNOLDS, CHARLES DR.
Address	3316 LARRABEE OAKS ST.
City-State-Zip:	FOREST GROVE OR 97116

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: PHILIP SCHAEFFER DIRECTOR/SECRETARY 03/14/2018

Electronic Signature of Signing Officer/Director Detail — Date