

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004289

Entity Name: FRIENDS OF SILVER RIVER STATE PARK, INC.**Current Principal Place of Business:**1425 NE 58TH AVE
OCALA, FL 34470**Current Mailing Address:**1425 NE 58TH AVE
OCALA, FL 34470**FEI Number:** 56-2511929**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPIEWAK, CLAUDIA T
1425 NE 58TH AVE
OCALA, FL 34470 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 BOARD FINANCE COMMITTEE
Name SPIEWAK, CLAUDIA
Address PO BOX 524
City-State-Zip: SILVER SPRINGS FL 34489

Title 5TH CHAIR
Name DRUDING, VINCE
Address 6750 NW 62ND ST RD
City-State-Zip: OCALA FL 34482

Title VP
Name KAUFMAN, JANE
Address 16991 E FORT KING ST
City-State-Zip: SILVER SPRINGS FL 34488

Title PRES
Name EVANS, TARYN
Address 15620 SE 150TH AVE
City-State-Zip: WEIRSDALE FL 32195

Title SECRETARY
Name GAWENDA, EV
Address 100 NE 63RD CT
City-State-Zip: OCALA FL 34470

Title TREASURER
Name DICKENSHEET, DRUCILLA
Address 5541 SW 86TH STREET
City-State-Zip: OCALA FL 34476

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: CLAUDIA SPIEWAK**BOARD FINANCE
COMMITTEE****02/07/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date