

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000002999

Entity Name: FRIENDS OF SEMINOLE COUNTY PARKS AND PRESERVATION FOUNDATION, INC.**FILED**
Jul 27, 2015
Secretary of State
CC3479016537**Current Principal Place of Business:**1609 WOOD DUCK DRIVE
WINTER SPRINGS, FL 32708**Current Mailing Address:**PO BOX 623191
OVIEDO, FL 32762 US**FEI Number: 46-2616150****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**STEENSON, ROBERT L
1609 WOOD DUCK DRIVE
WINTER SPRINGS, FL 32708 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	PRESIDENT
Name	STEENSON, ROBERT L
Address	1609 WOOD DUCK DRIVE
City-State-Zip:	WINTER SPRINGS FL 32708

Title	VP
Name	SLOAN, CHARLES
Address	1608 WOOD DUCK DRIVE
City-State-Zip:	WINTER SPRINGS FL 32708

Title	DIRECTOR
Name	WALSH, BRIAN
Address	THE COLLAGE COMPANIES 585 TECHNOLOGY PARK
City-State-Zip:	LAKE MARY FL 32746

Title	DIRECTOR
Name	DOLAN, SUSIE
Address	WASTE PRO USA 3705 ST JOHNS PKWY
City-State-Zip:	SANFORD FL 32771

Title	SECRETARY
Name	WHITTIER, BARBARA
Address	394 KING STREET
City-State-Zip:	OVIEDO FL 32762

Title	EX OFFICIO MEMBER
Name	ABEL, JOSEPH L
Address	SEMINOLE COUNTY LEISURE SERVICES 150 N PALMETTO AVE
City-State-Zip:	SANFORD FL 32771

Title	TREASURER
Name	BARNETT, VICTORIA
Address	MOORE STEPHENS LOVELACE, P.A. 255 SOUTH ORANGE AVENUE SUITE 600
City-State-Zip:	ORLANDO FL 32801

Title	DIRECTOR
Name	CRISWELL, MATTHEW
Address	WEATHERSHIELD ROOFING GROUP 920 BRITT CT #128
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

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: ROBERT STEENSON**PRESIDENT****07/27/2015**

Electronic Signature of Signing Officer/Director Detail

Date