

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29957

Entity Name: FRIENDS OF O'LENO, INC.

Current Principal Place of Business:

OLENO STATE PARK
410 OLENO PARK RD
HIGH SPRINGS, FL 32643

Current Mailing Address:

P.O. BOX 2879
HIGH SPRINGS, FL 32655 US

FEI Number: 59-3035729

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCLAIN, KAREN L
655 SE DIAMONDBACK GLN
HIGH SPRINGS, FL 32643-1536 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: KAREN L. MCLAIN

03/11/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BISCH, EDWARD J
Address 2450 NW 10TH STREET
City-State-Zip: BELL FL 32619

Title DIRECTOR
Name WALSH, HARRIET A
Address 19146 NW 235TH STREET
City-State-Zip: HIGH SPRINGS FL 32643

Title VP, SECRETARY, DIRECTOR
Name SHAW, JEAN
Address 20393 S. HWY 441
City-State-Zip: HIGH SPRINGS FL 32643

Title VP, DIRECTOR
Name TRAVIS, DRU
Address 15337 NW 214 TERRACE
City-State-Zip: HIGH SPRINGS FL 32643

Title TREASURER, DIRECTOR
Name MCLAIN, KAREN L
Address 655 SE DIAMONDBACK GLN
City-State-Zip: HIGH SPRINGS FL 32643-1536

Title DIRECTOR
Name THON, JUNE
Address 656 SE OLD BELLAMY RD
City-State-Zip: HIGH SPRINGS FL 32643

Title DIRECTOR
Name FEROGIA, LESLIE
Address 202 DOGWOOD CT
City-State-Zip: HIGH SPRINGS FL 32643

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: KAREN L MCLAIN

TREASURER

03/11/2018

Electronic Signature of Signing Officer/Director Detail

Date