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Feb 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 763694 (7)
1. Corporation Name

FRIENDS OF FLORIDA FOLK INCORPORATED



Principal Place of Business: 1625 VEREDA VERDE, SARASOTA FL 34232-2164
Mailing Address: 1625 VEREDA VERDE, SARASOTA FL 34232-2164

3. Date Incorporated or Qualified: 06/15/1982
3a. Date of Last Report: 03/08/1996
4. FEI Number: 65-0055900
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
BULLOCK, SUE
2019 SADLER ROAD
FT. MYERS FL 33917

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	VP <input checked="" type="checkbox"/> DELETE
NAME	HEWITT, BILL
STREET ADDRESS	1625 VEREDA VERDE
CITY-ST-ZIP	SARASOTA FL
TITLE	PD <input type="checkbox"/> DELETE
NAME	PLITT, ROBIN
STREET ADDRESS	131 TULIP TREE DR
CITY-ST-ZIP	LANTANA FL
TITLE	SD <input type="checkbox"/> DELETE
NAME	SNYDER, KEITH
STREET ADDRESS	951 BLACKWOOD STREET
CITY-ST-ZIP	ALTAMONTE SPRINGS FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	BULLOCK, SUE
STREET ADDRESS	2019 SADLER ROAD
CITY-ST-ZIP	FT. MYERS FL
TITLE	CD <input type="checkbox"/> DELETE
NAME	HEWITT, JEAN
STREET ADDRESS	1625 VEREDA VERDE
CITY-ST-ZIP	SARASOTA FL 34232
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CLAYTON, BEN
1.3 STREET ADDRESS	2912 N. WHISPERBAY CT.
1.4 CITY-ST-ZIP	OWIEDO, FL. 32765
2.1 TITLE	PD <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PLITT, ROBIN
2.3 STREET ADDRESS	131 TULIP TREE DR
2.4 CITY-ST-ZIP	LANTANA, FL 33462
3.1 TITLE	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SNYDER, KEITH
3.3 STREET ADDRESS	951 BLACKWOOD ST.
3.4 CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32701
4.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	DEVANE, ROSY
4.3 STREET ADDRESS	603 E. BEACON RD
4.4 CITY-ST-ZIP	LAKELAND, FL. 33803
5.1 TITLE	CD <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	HEWITT, JEAN
5.3 STREET ADDRESS	1625 VEREDA VERDE
5.4 CITY-ST-ZIP	SARASOTA, FL. 34232
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rosy Devane 02-10-97 941-693-3816
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0082925

CR2E037 (9/96)