

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768887

FILED
Mar 30, 2009
Secretary of State

Entity Name: FRIENDS OF NATURE PARKS, INC.

Current Principal Place of Business:

3540 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32641 US

New Principal Place of Business:

Current Mailing Address:

3540 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32641 US

New Mailing Address:

FEI Number: 59-2375592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVERT, HANNAH
4301 NW 34TH DR
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

SOUILLIARD, BRITTANY
3310 NW 31ST AVENUE
GAINESVILLE, FL 32605 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: BRITTANY SOUILLIARD

03/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON-WEBER, PENNY
Address: 3621 NW 30TH PL
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: TYLER, ALICE
Address: P.O. BOX 308
City-St-Zip: WILLISTON, FL 32696

Title: T () Delete
Name: COVERT, HANNAH
Address: 4301 NW 34TH DR
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: RHODES, MARY
Address: 8121 NE 221 ST
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SOUILLIARD, BRITTANY
Address: 3310 NW 31ST AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRITTANY SOUILLIARD

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03/30/2009

Electronic Signature of Signing Officer or Director

Date