

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 802200

FILED
Jan 29, 2008
Secretary of State

Entity Name: THE BOK TOWER GARDENS FOUNDATION, INC.

Current Principal Place of Business:

HISTORIC BOK SANCTUARY
1151 TOWER BLVD
LAKE WALES, FL 338533412 US

New Principal Place of Business:

HISTORIC BOK SANCTUARY
1151 TOWER BLVD
LAKE WALES, FL 33853 US

Current Mailing Address:

HISTORIC BOK SANCTUARY
1151 TOWER BLVD
LAKE WALES, FL 338533412 US

New Mailing Address:

HISTORIC BOK SANCTUARY
1151 TOWER BLVD
LAKE WALES, FL 33853 US

FEI Number: 23-1352009

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, ROBERT P
1151 TOWER BLVD.
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

PRICE, DAVID M
1151 TOWER BLVD.
LAKE WALES, FL 33853 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: DAVID M. PRICE

01/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: THAYER, BRONSON A
Address: 2202 N WESTSHORE BLVD, # 150
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: BRYAN, J.F. IV
Address: ONE INDEPENDENT SQ, # 3201
City-St-Zip: JACKSONVILLE, FL 32202

Title: P (X) Delete
Name: SULLIVAN, ROBERT P
Address: 1151 TOWER BOULEVARD
City-St-Zip: LAKE WALES, FL 33853

Title: AST (X) Delete
Name: JOLLEY, STEVE
Address: 1151 TOWER BLVD
City-St-Zip: LAKE WALES, FL 33853

Title: TD (X) Delete
Name: NEWTON, JOAN W
Address: 121 W. FORSYTH ST-#200
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRICE, DAVID M
Address: 1151 TOWER BLVD
City-St-Zip: LAKE WALES, FL 33853 US

Title: AST (X) Change () Addition
Name: JOLLEY, STEPHEN B
Address: 1151 TOWER BLVD
City-St-Zip: LAKE WALSE, FL 33853

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

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

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: DAVID M. PRICE

P

01/29/2008

Electronic Signature of Signing Officer or Director

Date