
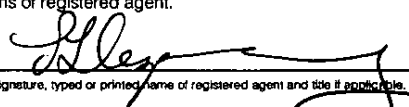
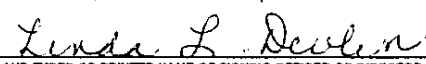


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N00000000481						FILED 08 APR 28 PM 2: 27 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Entity Name FRIENDS OF ANASTASIA STATE RECREATION AREA, INC.				Principal Place of Business 1304A A1A SOUTH ST AUGUSTINE, FL 32084			
2. Principal Place of Business - No P.O. Box #				Mailing Address 1304A A1A SOUTH ST AUGUSTINE, FL 32084			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
3. Mailing Address				4. FEI Number 59-3654107			
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable			
6. Name and Address of Current Registered Agent COCKCROFT, KAREN 1721 SANTANDER STREET SAINT AUGUSTINE, FL 32080				7. Name and Address of New Registered Agent Name Brandy Despang Street Address (P.O. Box Number is Not Acceptable) 600-12 Whispering Circle St. Augustine, FL City FL Zip Code 32084			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE 				DATE 4/15/08			
Filing Fee is \$61.25 Due by May 1, 2008				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GETSINGER, GEORGE 202 HERMASA STREET SAINT AUGUSTINE, FL 32080	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Linda Devlin 1340A A1A South St. Augustine, FL 32080	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SEAMAN, LEO 1323 SAN JAUN STREET SAINT AUGUSTINE, FL 32080	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Brandy Despang 600-12 Whispering Circle St. Aug. FL. 32084	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T COCKCROFT, KAREN 1721 SANTANDER STREET SAINT AUGUSTINE, FL 32080	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vp Constance Wierking 5488 A1A South St. Augustine, FL 32080	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	\$34/28	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	St. Augustine, FL 32080	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	\$34/28	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	St. Augustine, FL 32080	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: 				Date 4-11-08 Daytime Phone # 904-461-9322			



Florida Department of Environmental Protection

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 24, 2008

Mr. Sean Toner
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Toner:

This letter is to certify that Friends of Anastasia State Recreation Area, Inc is a duly authorized citizen support organization under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to Section 617.0122, F.S., this filing is exempt from any fees when certified by this department.

Please call Mary Hanley at 245-3081 if additional information is needed.

Sincerely,

A handwritten signature in black ink that reads "Mike Bullock". The signature is written in a cursive, flowing style.

Mike Bullock
Director
Florida Park Service

MB/mh

Enclosure