2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001600

Address:

City-St-Zip:

FILED Apr 07, 2009 Secretary of State

Entity Nar	ne: FRIENDS	S OF CAPE FLORIDA, INC.						
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:				
	ANDON BLVI AYNE, FL 331							
Current M	ailing Addre	ss:	New Mailing Address:					
	ANDON BLVI AYNE, FL 331							
FEI Number:	55-0810948	FEI Number Applied For ()	FEI Number Not App	licable ()	Certific	ate of Status Desi	red()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:				
8221 SW 7 #378	R, SARAH 72 AVENUE 33143 US		1500 NW 1 #1602	LLEWELLYN, KENDALL O 1500 NW 12 AVENUE #1602 MIAMI, FL 33136 US				
	named entity of Florida.	submits this statement for the	ourpose of changing	its registere	ed office or	registered agen	t, or both,	
SIGNATUR	RE: KENDAL	L LLEWELLYN		04/07/2009				
	Electro	nic Signature of Registered Ag	ent			Date		
OFFICERS	S AND DIREC	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	D (SKINNER, ROI 561 SABAL PA KEY BISCAYN	LM DR	Title: Name: Address: City-St-Zip:		() Change	() Addition		
Title: Name: Address: City-St-Zip:	D (LLEWELYN, K P.O. BOX 014' MIAMI, FL 33'	791	Title: Name: Address: City-St-Zip:	T/D LLEWELYN P.O. BOX 0 MIAMI, FL	N, KÉN 014791	() Addition		
Title: Name: Address: City-St-Zip:	D (PRIETO, MARO 150 SE 25 RD MIAMI, FL 33		Title: Name: Address: City-St-Zip:		() Change	() Addition		
Title: Name:	() Delete	Title: Name:	D STEWART.		(X) Addition		

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.

Address:

City-St-Zip:

P.O. BOX 015758 MIAMI, FL 33101

SIGNATURE: KENDALL LLEWELLYN T/D 04/07/2009



Florida Department of Environmental Protection

Marjory Stoneman Douglas Building 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000 N00000001600

4-7-09

Charlie Crist Governor

Jeff Kottkamp Lt. Governor

Michael W. Sole Secretary

April 14. 2009

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 Cape Florida, 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,

Mike Bullock Director

Florida Park Service

e Bullock

MB/mh

Enclosure