

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0070719

DOCUMENT # N00000002056

1. Entity Name

FRIENDS OF THE GAINESVILLE-HAWTHORNE TRAIL, INC.



FILED

03 FEB 25 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

PO BOX 357841

GAINESVILLE FL ~~32605~~
32635

Mailing Address

PO BOX 357841

GAINESVILLE FL ~~32605~~
32635

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

P.O. Box 357841

Suite, Apt. #, etc.

P.O. Box 357841

City & State

Gainesville, FL

City & State

Gainesville, FL

Zip

32635

Country

USA

Zip

32635

Country

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3644441

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANKERSEN, THOMAS T
1626 NW 11TH RD
GAINESVILLE FL 32605

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME SYEVERS, TOM
STREET ADDRESS 3027 NW 49TH STREET
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE PD ☒ Change ☐ Addition
NAME Thomas J. Stevens III
STREET ADDRESS 3027 N.W. 49th St.
CITY-ST-ZIP Gainesville, FL 32606-6068

TITLE VPD ☐ Delete
NAME THOMPSON, EWEN
STREET ADDRESS 3215 NW 17TH STREET
CITY-ST-ZIP GAINESVILLE FL 32605

TITLE D ☐ Change ☒ Addition
NAME Walt Barry
STREET ADDRESS 1411 N.W. 31st St.
CITY-ST-ZIP Gainesville, FL 32605

TITLE SD ☐ Delete
NAME LASSETER, NANCY
STREET ADDRESS 3215 NW 17TH STREET
CITY-ST-ZIP GAINESVILLE FL 32605

TITLE D ☐ Change ☒ Addition
NAME Ona Colasante,
STREET ADDRESS P.O. Box 190
CITY-ST-ZIP Lochloosa, FL 32662

TITLE TD ☐ Delete
NAME BOYD, SHERRI
STREET ADDRESS 1830 SE 32ND PLACE
CITY-ST-ZIP GAINESVILLE FL 32641

TITLE D ☐ Change ☒ Addition
NAME Linda Crider
STREET ADDRESS 1030 S.W. 11th Terr.
CITY-ST-ZIP Gainesville, FL 32601

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Mary Saxe Apelin
STREET ADDRESS 3130 N.W. 10th Place
CITY-ST-ZIP Gainesville, FL 32605

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Robert Karl Hutchinson
STREET ADDRESS 3218 SE. 27th St.
CITY-ST-ZIP Gainesville, FL 32641

12. I 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 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:

Thomas J. Stevens III Feb. 6, 2003 352-392-1845

CR2E037 (10/02)



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

February 20, 2003

Mr. Sean Toner
Division of Corporations
Florida Department of State
409 East Gaines Street
Tallahassee, Florida 32399

Dear Mr. Toner,

This letter is to certify to you that Friends of the Gainesville-Hawthorne Trail, Inc., is a duly authorized citizen support organization which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to F.S. 617.0122, this filing is exempt from any fee's when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 245-3098.

Warmest regards,

Wendy Spencer, Director
Florida Park Service

WS/pwb

Attachments