

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008118

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** THE FRIENDS OF HENRY B. PLANT PARK, INC.

**Current Principal Place of Business:**

401 WEST KENNEDY BLVD  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18523  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 59-3759368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SINK, EDITH V  
5125 SOUTH NICHOL STREET  
TAMPA, FL 33611 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WOODROFFE, PATSY  
Address: 2805 SAMARA DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: A2VP  
Name: ISBELL, SUSAN  
Address: 5111 SOUTH NICHOL ST.  
City-St-Zip: TAMPA, FL 33611

Title: SD  
Name: MILAS, JULI  
Address: 4728 TRAVERTINE DRIVE  
City-St-Zip: TAMPA, FL 33615

Title: TD  
Name: SINK, EDITH V  
Address: 5125 S. NICHOL STREET  
City-St-Zip: TAMPA, FL 33611

Title: ATD  
Name: VAN VORIS, CYNTHIA A  
Address: 2709 CHAMBRAY LANE  
City-St-Zip: TAMPA, FL 33611

Title: 2VPD  
Name: GILL, PEGGY  
Address: 71 MARTINIQUE  
City-St-Zip: TAMPA, FL 33606

I hereby 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 all other like empowered.

SIGNATURE: EDITH V. SINK

TD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date