

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005497

FILED
Apr 30, 2003
Secretary of State

Entity Name: FRIENDS OF ST. GEORGE ISLAND STATE PARK, INC.

Current Principal Place of Business:

1900 E GULF BEACH DR
ST GEORGE ISLAND, FL 32328

New Principal Place of Business:

Current Mailing Address:

1900 E GULF BEACH DR
ST GEORGE ISLAND, FL 32328

New Mailing Address:

FEI Number: 13-4211243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINCE, PAMELA D
1900 E GULF BEACH DR
ST GEORGE ISLAND, FL 32328 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 () Delete
Name: SPANGLER, CURTIS R
Address: 457 W PINE AVE
City-St-Zip: ST GEORGE ISLAND, FL 32328

Title: VD () Delete
Name: BUSH, HARDY
Address: 143 MAGNOLIA LAND
City-St-Zip: APALACHICOLA, FL 32720

Title: SD () Delete
Name: ELLINGSON, JO ANN
Address: 781 W PINE AVE
City-St-Zip: ST GEORGE ISLAND, FL 32328

Title: T () Delete
Name: PRINCE, PAMELA
Address: 1900 E GULF BEACH DR
City-St-Zip: ST GEORGE ISLAND, FL 32328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 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: PAMELA PRINCE

T

04/30/2003

Electronic Signature of Signing Officer or Director

Date