2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # N03000010784 04 APR 28 AM 9: 01 FRIENDS OF FLAGLER/VOLUSIA COASTAL PARKS CSO. Deuneimit er sikife TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address %GAMBLE ROGERS STATE RECREATION AREA %GAMBLE ROGERS STATE RECREATION AREA 3100 S. A1A 3100 S. A1A FLAGLER BEACH, FL 32176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122004 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAYER, DENNIS K ESQUIRE 306 S OCEANSHORE BLVD Street Address (P.O. Box Number is Not Acceptable) FLAGLER BEACH, FL 32136 City Zip Code FL 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 regist 4-14-09 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing ~-\$**5.00** May Be Make check payable to Trust Fund Contribution. \Box Due by May 1, 2004 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TD TITLE ☐ Delete TITLE Addition MATSON, ROY NAME NAME STREET ADDRESS 215 S OCEANSHORE BLVD STREET ADDRESS CITY-ST-ZIP FLAGLER BEACH, FL 32136 CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change ■ Addition MCGREW, JOY NAME NAME -STREET ADDRESS 1724 S FLAGLER AVE STREET ADDRESS CITY-ST-ZIP FLAGLER BEACH, FL 32136 CITY-ST-ZIP PΩ TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAYER, DENNIS K NAME NAME STREET ADDRESS 306 S OCEANSHORE BLVD STREET ADDRESS CITY-ST-ZIP FLAGLER BEACH, FL 32136 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 suppliemental 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 thistee 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.

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNING OFFICER OF DIRECTOR

☐ Delete

Date

Daytime Phone #

☐ Change

Addition



Department of Environmental Protection

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

Colleen M. Castille Secretary

April 23, 2004

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 the Friends of Flagler/Volusia Coastal Parks CSO, 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 fees 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.

Sincerely, Mike Bullock

Larry Perry Assistant Director

Florida Park Service

LP/pwf

Attachments