

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005279

FILED
Jan 03, 2006
Secretary of State

Entity Name: FRIENDS OF SUWANNEE RIVER STATE PARK, INC.

Current Principal Place of Business:

20185 CR 132
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

20185 CR 132
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 20-1169426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOENFELDER, BETH
20185 CR 132
LIVE OAK, FL 32060 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: D () Delete
Name: SCHOENFELDER, BETH
Address: 370 NE FOREST VIEW WAY
City-St-Zip: LEE, FL 32059

Title: D () Delete
Name: SCHOENFELDER, WALTER
Address: 370 NE FOREST VIEW WAY
City-St-Zip: LEE, FL 32059

Title: D () Delete
Name: FULS, DOLLY
Address: PO BOX 232
City-St-Zip: MADISON, FL 32341

Title: D () Delete
Name: FULS, CHUCK
Address: PO BOX 232
City-St-Zip: MADISON, FL 32341

Title: D () Delete
Name: PETERS, JERRY
Address: 9267 141ST DR
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ARRANT, LARRY
Address: 20185-CR 132
City-St-Zip: LIVE OAK, FL 32060

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 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.

SIGNATURE: BETH SCHOENFELDER

D

01/03/2006

Electronic Signature of Signing Officer or Director

Date

Filing fee exempt pursuant to Section 258.015, Florida Statute, per letter
from Division of Recreation and Parks, SEP 2, 2006