2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000007100

1. Entity Name
THE NATURE PARK ENVIRONMENTAL EDUCATION FOUNDATION, INC.

FILED
Jul 16, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
2787 N TAMIAMI TRL NORTH FORT MYERS, FL 33903	POB 6966 FORT MYERS, FL 33911

07072008 No Chg-NP CR2E037 (4/08)

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4. FEI Number
38-3707022

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CRONIN, THOMAS R SR
2787 N TAMIAMI TRL
NORTH FORT MYERS, FL 33903

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

Filing Fee is $61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	CRONIN, THOMAS SR
STREET ADDRESS	2787 N TAMIAMI TRL
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	D
NAME	CRONIN, PAMELA
STREET ADDRESS	2787 N TAMIAMI TRL
CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/16/08-80001-019 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 R Cronin 7/10/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #