

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N21189

1: Entity Name
FRIENDS OF THE ISLAMORADA AREA STATE PARKS,
INC.



Principal Place of Business
84900 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

Mailing Address
P.O. BOX 236
ISLAMORADA, FL 33036

FILED

08 MAR -6 PM 5:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01222008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0028954

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

8. Name and Address of Current Registered Agent

MIKLAS, JOE
MILE MARKER 88.7
TAVERNIER, FL 33070

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SYLVESTER, EILEEN
166 GULFVIEW DR.
ISLAMORADA, FL 33036

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
STROBEL, KAREN
165 CORAL RD.
ISLAMORADA, FL 33036

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MALONE, KATHLEEN
148 GARDENIA STREET
TAVERNIER, FL 33070

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
HARING, SKIP
68300 OVERSEAS HWY
LONG KEY, FL 33001

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KIRCHNER, ELLE
155 CORT LANE
TAVERNIER, FL 33070

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DE
SPRUNT, DONNA
102 MOHAWK STREET
TAVERNIER, FL 33070

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SKIP HARING, DT

1-22-08

305-664-4746

Date

Daytime Phone #



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

February 11, 2008

Mr. Sean Toner
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Toner:

This letter is to certify to you that the Friends of the Islamorada Area State Parks, 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.

If further information is needed feel free to contact Eryn Calabro at 245-2939.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/edc

Attachments