

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26027

FILED
Jan 17, 2009
Secretary of State

Entity Name: FRIENDS OF DELEON SPRINGS STATE PARK, INC.

Current Principal Place of Business:

601 PONCE DELEON BLVD.
DELEON SPRINGS, FL 32130

New Principal Place of Business:

Current Mailing Address:

601 PONCE DELEON BLVD.
DELEON SPRINGS, FL 32130

New Mailing Address:

FEI Number: 58-1959138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSI, KAREN
1409 MANOR WAY
DELAND, FL 32720 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: P () Delete
Name: RUSSI, KAREN
Address: 1409 MANOR WAY
City-St-Zip: DELAND, FL

Title: V () Delete
Name: BURRIS, JODY
Address: 1504 ROBINWOOD DR
City-St-Zip: DELAND, FL 32720

Title: S () Delete
Name: SLYKER, ELEANOR
Address: 519 LEAF CIRCLE
City-St-Zip: DELAND, FL 32724

Title: CS () Delete
Name: POLK, KAREN
Address: 601 PONCE DELEON BLVD
City-St-Zip: DELEON SPRINGS, FL 32130

Title: T () Delete
Name: RUSSAK, JANICE
Address: 237 ANDALUSIA AVENUE
City-St-Zip: DELEON SPRINGS, FL 32130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: HESKETH, BERYL
Address: 1398 HENDREN DRIVE
City-St-Zip: DELAND, FL 32724

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 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: JANICE RUSSAK

T

01/17/2009

Electronic Signature of Signing Officer or Director

Date



Florida Department of Environmental Protection

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

N26027
1-17-09

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 24, 2009

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 that Friends of DeLeon Springs State Park, Inc. is a duly authorized citizen support organization under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to Section 617.0122, F.S., this filing is exempt from any fees when certified by this department.

Please call Mary Hanley at 245-3081 if additional information is needed.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/mh

Enclosure