NO	FILE NOW: FIL		RTMENT OF STATE	APPROVI	1052
N .	RPORATION UAL REPORT	Sandra E	3. Mortham	FILED	
	1996	• /	ry of State CORPORATIONS	96 HAY 24 AM	10: 43
DOCU 1. Corporatio	MENT # N3124	0 (7)		SECRETARY OF TALLAHASSEE.	STATE FLORIDA
THE F	RIENDS OF FORT COOPER	I, INC.			
	OLD FLORAL CITY ROAD	Mailing Address P.O. BOX 1784		(10011101101111111111111111111111111111	, een eran eran eist eist 81611 81611 1661
INVERNESS I	FL 34450	INVERNESS FL 34451		3. Date incorporated or O missed	20 Date of Land David
2. Principal P	lace of Business	2a. Mailing Address	·	3. Date Incorporated or Qualified 03/17/1989	3a. Date of Last Report 06/02/1995
21		26		4. FEI Number 59-2978381	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25	Zip 29	Country 30	8. This corporation has liability for	
	9. Name and Address of Curre		81 Name	10. Name and Address of New I	
11. Pursuant	ESS FL 34450	2 and 617.1508, Florida Statutes da. Such change was authorize tipn 617.0503, Florida Statutes	83 14 Inv 84 City	Address (P.O. Box Number is Not Acceptal  17 Poe St  Verness, Fla, 34450  proporation submits this statement for the publicand of directors. I hereby accept the app	FL 85 Zip Code
SIGNATURE .	Signature, typed or printed name of registered agen		: Registered Agent signature re	anuland when rejustation	DATE
12.	OFFICERS AN	D DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
NAME	KELLY, DONALD W.	<u>L</u> JSECETE	1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS CITY - ST - ZIP	1417 POE STREET INVERNESS FL 34450	•	1.3 STREET ADDRESS 1.4 City-St-Zip	•	
TITLE NAME	VD Byler, Howard	DELETE	2 1 TITLE		☐ Change ☐ Addition
	1403 POE ST.		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP TITLE	INVERNESS FL 34450 TD	DELETE	2.3 STREET ADDRESS 2.4 CHY-ST-ZIP 3.1 TITLE		
CITY-ST-ZIP TITLE NAME	INVERNESS FL 34450 TD KARNES, WILLIAM	DEFEIE	2. 4 CHTY-ST-2IP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450	-	2. 4 CITY - ST - ZIP 3.1 TITLE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER:	□DELETE	2.4 CHY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CHY-SI-ZIP 4.1 TITLE	TD	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734	-	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	Doris Karnes	☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451 TD	-	2.4 City-St-ZiP 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4. City-St-ZiP 4.1 Title 4.2 NAME		☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451	DELETE	2.4 City-S1-ZiP 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4. City-S1-ZiP 4.1 Title 4.2 NAME 4.3 STREET ADDRESS 4.4 City-S1-ZiP 5.1 Title 5.2 NAME	Doris Karnes	Change Addition  Change Addition  Thange Addition  Cr. Inverness, Fla
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451 TD PETTY, WILMA 121 TROUT ST. INVERNESS FL 34450	□ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Doris Karnes	Change Addition  Change Addition  Thange Addition  Cr. Inverness, Fla
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TD CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451 TD PETTY, WILMA 121 TROUT ST. INVERNESS FL 34450 D	□ DELETE	2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	Doris Karnes	Change Addition  Change Addition  Change Addition  Cr. Inverness, Fla
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451 TD PETTY, WILMA 121 TROUT ST. INVERNESS FL 34450 D YOCZIK, STEPHEN 3100 OLD FLORAL CITY ROA INVERNESS FL 34450 the Information indicated on this area.	DELETE  DELETE  DELETE  Delete tensor of a proposal all p	2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-SI-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-SI-ZIP ed and does not quality	Doris Karnes 811 Longfellow Ti	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that oath; that appears in	INVERNESS FL 34450 TD KARNES, WILLIAM 811 LONGFELLOW TER. INVERNESS FL 34450 TO CRAIG, MARY L. P.O. BOX 734 INVERNESS FL 34451 TD PETTY, WILMA 121 TROUT ST. INVERNESS FL 34450 D YOCZIK, STEPHEN 3100 OLD FLORAL CITY ROA INVERNESS FL 34450 the Information indicated on this area.	DELETE  DELETE  DELETE  Delete to the proper of the proper	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ed and does not quality report is true and accomposition of the control of the	Doris Karnes 811 Longfellow TI  If you the exemption stated in Section 119. Surate and that my signature shall have the this report as required by Chapter 617, Fig.	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition





## Department of Environmental Protection

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

Virginia B. Wetherell Secretary

May 20, 1996

Mr. David Mann, Director Division of Corporations Department of State Post Office Box 6327 Tallahassee, Florida 32314

Dear Mr. Mann:

This letter is to certify to you that The Friends of Fort Cooper, 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.

Sincerely,

Fran P. Mainella, CLP

Director

Division of Recreation and Parks

FPM/pwc