

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
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95 JAN 27 AM 10:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

22713 CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N38388 (7)

1. Corporation Name

FRIENDS OF MACARTHUR BEACH STATE PARK, INC.

Principal Place of Business

Mailing Address

% WILLIAM J. HYLAND, JR.
10900 SR 703 (A-1-A)
N PALM BCH FL 33408-3440

% WILLIAM J. HYLAND, JR.
10900 SR 703 (A-1-A)
N PALM BCH FL 33408-3440

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1990

3a. Date of Last Report

03/29/1994

4. FEI Number

65-0196497

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HYLAND, WILLIAM J., JR.
10900 STATE ROAD 703 (A-1-A)
NORTH PALM BEACH FL 33408

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME PFLEGER, JOHN A
STREET ADDRESS 10900 ST. RD. 703 (A-1-A)
CITY-ST-ZIP NORTH PALM BEACH FL 33408

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD
NAME KIMBELL, ELSA R
STREET ADDRESS 911 N. POMPANO DRIVE
CITY-ST-ZIP JUPITER FL 33458

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE STD
NAME FILLIYAW, JOHN N
STREET ADDRESS 10900 ST. RD. 703 (A-1-A)
CITY-ST-ZIP NORTH PALM BEACH FL 33408

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John N. Fillyaw / Sec / Trans. 1/20/95 407/624-6250

QUALIFIED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



②

Department of Environmental Protection

Lawton Chiles
Governor

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000
February 10, 1995

Virginia B. Wetherell
Secretary

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 MacArthur Beach State Park 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

RECEIVED
95 FEB 15 AM 10:03
DIRECTOR
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA