

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N38388

1. Entity Name
FRIENDS OF MACARTHUR BEACH STATE PARK, INC.



Principal Place of Business
10900 SR 703 (A-1-A)
N PALM BCH, FL 33408

Mailing Address
10900 SR 703 (A-1-A)
N PALM BCH, FL 33408

FILED

07 MAR 19 PH 3:41

STATE
PALM BEACH, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02142007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0196497

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOBURN, THEODORE
2401 PGA BOULEVARD
STE 198
PALM BCH GARDENS, FL 33410

Name

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

City

FL

Zip Code

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, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MCCLOSKEY, DEBRA
2401 PGA BLVD #198
PALM BEACH GARDENS, FL 33410 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
DYTRYCH, WATESAH
18710 SE PINENEEDLE LANE
TEQUESTA, FL 33469 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
THOBURN, THEODORE
2401 PGA BLVD., SUITE 198
PALM BEACH GARDENS, FL 33410 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DOANE, REBECCA G
2000 PGA BLVD #4410
NORTH PALM BEACH, FL 33408 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Mech, William P
213 Sweet Bay Circle
Jupiter, FL 33458 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
HOPKINS, MARY S
9121 N. MILITARY TRAIL, #222
PALM BEACH GARDENS, FL 33410 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CRITTENDEN, EJ
2366 WILSEE ROAD
PALM BEACH GARDENS, FL 33410 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3/19 ☐ Change ☐ Addition

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:

THEODORE G THOBURN 2/26/06 561-624-0621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

March 15, 2007

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 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. Pursuant to F.S. 617.0122, this filing is exempt from any fees when certified by this department.

After filing, please return certified documents to Eryn Calabro at the above address, MS 535. If further information is needed feel free to call her at 245-2939.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/edc

Attachments