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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

Principal Place of Business

N45314

(4)

Mailing Address

FRIENDS OF THE APALACHICOLA NATIONAL FOREST, INC

1313 N DUVAL Tallahassee i	FL 32303	1313 N DUVAL TALLAHASSEE FL 32303-53	512							
						3.	Date Incorporated or Qualified 09/25/1991		oate of Last F 04/29/199	
2. Principal Pi 21	ace of Business	2a. Mailing Address 26			4.	NOT APPLICABLE		 	oplied For ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional equired	
City & State	9	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be			
Zip	Country	Zip		ountry		8.	This corporation has liability for		e tax under s	
24	9. Name and Address of Current	Pagistared Agent	30	1			Florida Statutes L Name and Address of New Re		No No	
	5. Hallo alla Addioss of Californ	negistored Agent		81	Name	10.	Haille Bille Addiess Of Hear N	Alereien	Mant	
MEANS, D. BRUCE										
	DUVAL ST				2 Street Address (P.O. Box Number is Not Acceptable)					
- CONTES		1								
TALLAHASSEE FL 32303				84	City			FL	85 Zip	Code
agent. I a	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida, Such change was	authorize	ed by	the corp	corporation poration's b	n submits this statement for the poard of directors. I hereby acce	purpose d	of changing in pointment as	ts registered registered
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOI	L: Register	ed Age	nt signature a	required when	reinstating)	DATE		
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFI		D DIRECTOR	RS IN 12
TITLE	PD	DELETE	1,1]	TITLE					Change	Addition
NAME	TSCHINKEL, WALTER R		1,21	NAME						
STREET ADDRESS	1561 MARIM AVE		1.3 5	STREET	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL		1.4 (1.4 CITY - ST - ZIP						
TITLE	TD DELETE		2.1	2.1 Tille					Change	Addition
NAME	STEINHEIMER, KATHY		2.21	NAME						
STREET ADDRESS	1315 JACKSON ST	2		2.3 STREET ADDRESS						
CITY-ST-ZIP	TALLAHASSEE FL		2.4	2.4 CITY-ST-ZIP						
TITLE	D	DELETE	3.1 1	TITLE		7			Change	Addition
NAME	MEANS, D. BRUCE	EANS, D. BRUCE 3.2		NAME						
STREET ADDRESS	1313 N DUVAL STREET		3.3 5	3.3 STREET ADDRESS						
CITY-ST-ZIP	TALLAHASSEE FL		3.4	CITY-S	T-ZIP					
TITLE			4.1 1	TITLE					Change	Addition
NAME	COOK, DAVID C		4.2	NAME						
STREET ADDRESS	4132 ARKLOW DRIVE		4.3 \$	STREET	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL		4.4 (CITY-S	I-ZIP					
TITLE	SD	☐ DELE1E	5.1 1	TITLE					Change	☐ Addition
NAME	BAKER, WILSON		5.2 #	NAME						
STREET ADDRESS	1422 CRESTVIEW AVENUE		5.3 \$	STREET	ADDRESS					
CITY-ST-ZIP	TALLAHASSEE FL			CITY-S	I - ZIP					-
TITLE		☐ DELETE	6.11	TITLE					L Change	Addition
NAME			6.21	NAME						
STREET ADDRESS	*		6.3 3	STREET	ADDRESS					
CITY-ST-ZIP				CITY-S						
informatio I am an oi	by certify that the information supplied in indicated on this annual report or su ficer or director of the corporation or t in Block 12 or Block 13 if changed, or	ipplemental annual report is t he receiver or trustee empov	lrue and vered to	accu	rate and	that my sid	anature shall have the same lea	al effect a	s if made un	der path: that l