FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

N9200000576 (0) DOCUMENT #

1. Corporation Name

EDIENDS	OF	MACI	ΔV	GARDENS.	INC.

FRIENDS OF MACLAY GARDENS, INC.						
incipal Place of	Business	Mailing Address				
3540 THOMASVII		3540 THOMASVILLE ROAD				
TALLAHASSEE FL 32308		TALLAHASSEE FL 32308		3. Date Incorporated or Qualified 12/03/1992	3a. Date of Last Report 04/20/1995	
Principal Place	of Business	2a. Mailing Address		4. FEI Number 59-3165260	Applied For Not Applicable	
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
Suite, Apt. #,	etc.	27			Lee Heduled	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
7:-	Country	28 Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,	
Zip	25	29 3	¬ ·	Florida Statutes 10. Name and Address of New R	No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New H	ahistalan where	
			81 Name			
WERNDLI.	PHILLIP A		82 Street A	ddress (P.O. Box Number is Not Acceptab	ile)	
3900 COM	MONWEALTH BOULEVARD	_	83			
DIVISION	OF RECREATION AND PARKS	3			85 Zip Gode	
TALLAHAS	SSEE FL 32399-3000		84 City	rporation submits this statement for the pur board of directors. I hereby accept the app	FL 1	
familiar with	, and accept the obligations of, Sec	ction 617.0503, Florida Statutes.			DATE	
GNATURE	ignature, typed or printed name of registered age		Registered Agent signature re	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12	
2.		ND DIRECTORS DELETE	13. 1.1 TITLE	nis	☐ Change 🔀 Addition	
ILE	DS MINCHOWEL MAKES	y	1.2 NAME	KNOZ, GARY 2912 QUAIL RISE		
AME	MUCHOVEJ, JAMES RT 4 BOX 4473		1.3 STREET ADDRESS	2912 QUAIL RISE	CT	
REET ADDRESS	MONTICELLO FL		1.4 C(TY - ST - ZIP	TALLAHASSEE, FL	32308 ☐ Change ► Addition	
TLE	D	X DELETE	2 1 TITLE	1 D/3	Change Pervious	
IAME	TRAGER, KEN		2 2 NAME	GOLDIE, EDIE	0 A	
TREET ADDRESS	3425 MAHONEY DR		2 3 STREET ADDRESS	2324 HAVERHILL A TALLAHASSEE, FL	72712	
ITY-ST-ZIP	TALLAHASEE FL 32308	EZ on ett	2 4 CITY - ST - ZIP	THUM AMSSE, FE	Change Addition	
ITLE	D	⊠ 0ELETE	3.1 TITLE 3.2 NAME	CARLSON, PEGGY 6970 STANPING PIN		
IAME }	DEISON, GLORIA		33 STREET ADDRESS	6970 STANPING PIN	ES VANE	
STREET ADDRESS	3725 BOBBIN MILL		34 CITY-ST-ZIP	TALLAHASSEE, FL	32312	
CITY-ST-ZIP	TALL FL 32312 DV	DELETE	4.1 TITLE	T	f fruguale f vanimon	
NAME	HUTCHINSON, HUTCH		4. 2 NAME	8000018 -05/21/9601	104005	
STREET ADDRESS	3069 CARLOW CIRCLE		4 3 STREET ADDRESS	***61.25		
CITY-ST-ZIP	TALLAHASSEE FL	Top. cre	4 4 City - ST - ZiP	10/-	Change Additio	
TITLE	DP	DELETE	51 TITLE 52 NAME	BUCHANAN MARY 16946 STANDING	DOUG	
NAME	BACA, ALAN		5.3 STREET ADDRESS	6946 STANDING	PINES LANE	
STREET ADDRESS	3190 PEER CT		5.4 CITY-ST-ZIP	TAGENTHASSEE, FL	32312	
CITY-ST-ZIP	TALLAHASSEE FL	DELETE	61 TITLE	D/P	Change Addition	
TITLE NAME	DT Horkan, Thomas		62 NAME	HORKAN, THOMAS 1344 LIMERICK DA	ر بر الاستاد على الاستاد على الاستاد ا	
STREET ADDRESS	2344 LIMERICK DR		6.3 STREET ADDRESS	2344 UMURICA	1 32308 1 4	
0.7. OT 3.0	TALLAHASSEE EL		64 CITY-ST-ZIP	TALLA HASSEE, F		
14. I do herel	by certify that the information suppl	ied with this filing is voluntarily furnic	shed and does not qual report is true and a	ualify for the exemption stated in Section 1 accurate and that my signature shall have tute this report as required by Chapter 617,	he same legal effect as if made und	
certify the	at the information indicated on this t	ornoration or the receiver or trustee	empowered to exec	accurate and that my signature shall have to oute this report as required by Chapter 617,	, Florida Statutes, and that my home	
appears i	in Block 12 or Block 13 if changed,	or on an accomment/with an addition				
SIGNA	TURE: W Mosh	UNI /VIUMUX	1 ING	MAS NERKAN 5-17	Daytime Phone #	
JIGHA	SIGNATURE AND TYPE	ED OR PRINTED NAME OF SIGNING OFFICE	OR DIRECTOR	pare	•	