

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N92000000576 (0)
1. Corporation Name

FRIENDS OF MACLAY GARDENS, INC.



Principal Place of Business

Mailing Address

3540 THOMASVILLE ROAD
TALLAHASSEE FL 32308

3540 THOMASVILLE ROAD
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified
12/03/1992

3a. Date of Last Report
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WERNDL, PHILLIP A
3900 COMMONWEALTH BOULEVARD
DIVISION OF RECREATION AND PARKS
TALLAHASSEE FL 32399-3000

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DS

☒ DELETE

NAME

MUCHOVEJ, JAMES

STREET ADDRESS

RT 4 BOX 4473

CITY-ST-ZIP

MONTICELLO FL

TITLE

D

☒ DELETE

NAME

TRAGER, KEN

STREET ADDRESS

3425 MAHONEY DR

CITY-ST-ZIP

TALLAHASSEE FL 32308

TITLE

D

☒ DELETE

NAME

DEISON, GLORIA

STREET ADDRESS

3725 BOBBIN MILL

CITY-ST-ZIP

TALL FL 32312

TITLE

DV

☐ DELETE

NAME

HUTCHINSON, HUTCH

STREET ADDRESS

3069 CARLOW CIRCLE

CITY-ST-ZIP

TALLAHASSEE FL

TITLE

DP

☒ DELETE

NAME

BACA, ALAN

STREET ADDRESS

3190 PEER CT

CITY-ST-ZIP

TALLAHASSEE FL

TITLE

DT

☐ DELETE

NAME

HORKAN, THOMAS

STREET ADDRESS

2344 LIMERICK DR

CITY-ST-ZIP

TALLAHASSEE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

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

6.4 CITY-ST-ZIP

D/S

KNOX, GARY

2912 QUAIL RISE CT

TALLAHASSEE, FL 32308

D/S

GOLDIE, EDIE

2324 HAVERHILL RD

TALLAHASSEE, FL 32312

D

CARLSON, PEGGY

6970 STANDING PINES LANE

TALLAHASSEE, FL 32312

800001832448

-05/21/96--01104--005

***61.25

D/T

BUCHANAN, MARY DOUG

6946 STANDING PINES LANE

TALLAHASSEE, FL 32312

D/P

HORKAN, THOMAS

2344 LIMERICK DR

TALLAHASSEE, FL 32308

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)