## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Apr 27, 2006 8:00 am Secretary of State

DOCUMENT # N93000001387  1. Entity Name				30 P	Secretary of State 04-27-2006 90149 046 ****61.25			
FRIENDS	OF THE HUGUENOT CEME	TERY, INC.						
Principal Plac	e of Business	Mailing Address						
C/O OLEN F.LEVELL,JR. 682 GILDA DRIVE ST. AUGUSTINE FL 32086		C/O OLEN F.LEVELL,JR. 682 GILDA DRIVE ST. AUGUSTINE FL 32086						
2. Principal P	race of Business	Memorial Pre 3. Mailing Address	sbyterian	_Church			)) <b>[</b> ]	
CIA	201 Preshyterian Church	1	Street					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MC	1st MOORE CR2E037 (10/05)			
32 5e v i 11 2 5 + vee + City & State		St.Augustine, FL City & State		4. FEI Number		Ap	plied For	
St Augustine, FI		32084 St. John		s (	59-3249371		t Applicable	
Zíp 3 2-08	Country 5+. John 5	Zip	Country	5. Certificate of S	itatus Desired	\$8.75 Add Fee Require		
3700	6. Name and Address of Current	Registered Agent		7. Name and Add	dress of New Register	<del> </del>		
			Name-					
BOLES, JOSEPH L JR 120 CHARLOTTE ST. ST. AUGUSTINE FL.32084			Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
31.	AUGUSTINE 1-E-32004							
			City		F	Zip Cod	е	
	named entity submits this statement to ions of registered agent.  Signature, typed or printed name of registered agent.		Registered Agent signature n		DAI			
	FILE NOW: FEE IS \$61,25 Due By May 1, 2006	9. Election Camp Trust Fund Co	entribution.	\$5.00 May Be Added to Fees	Florida Dep	eck Payable partment of S	State :	
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANC	SES TO OFFICERS AND			
NAME STREET ADDRESS CITY-ST-ZIP	NEALON, DONALD 252 KINGSTON DR ST. AUGUSTINE FL 32095	☐ Delete	TIFLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE	D	☐ Delete	TITLE	, <u>.</u>		☐ Change	☐ Addition	
NAME STREET ADDRESS	HARVEY, KAREN 6 FLAMINGO DR		NAME STREET ADDRESS					
	SAINT AUGUSTINE FL 32080		CITY-ST-ZIP		_		_	
TITLE	Р	☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS	TINGLEY, CHARLES A		NAME STREET ADDRESS					
CITY-ST-ZIP	18 CARERRA ST. ST AUGUSTINE FL		CITY-ST-ZIP					
TITLE	т	☐ Delete	TITLE			☐ Change	Addition	
NAME	LEVELL, OLEN JR		NAME					
STREET ADDRESS CITY-ST-ZIP	682 GILDA DR ST AUGUSTINE FL 32086		STREET ADDRESS CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE			☐ Change	Addition	
NAME	STUART, BEVERLY		NAME			-		
STREET ADDRESS CITY-ST-ZIP	249 KINGSTON DR ST. AUGUSTINE FL 32095		STREET ADDRESS					
TITLE	OT. FOGGOTINE I E 32030	☐ Delete	CITY-ST-ZIP			☐ Change	Addition	
NAME		□ Delete	NAME			Li Unange	LI AUGINOIT	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP	1		CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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: Ola F Frank St. Olan F. Lavell, Sv. Trensporer April 17 200 (904) 794-0215