

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

RECEIVED

JAN 2 2008

Dis District 2 Office  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01132008 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-3182934

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

KLEIN, MARYLOU  
19200 SW 101 PLACE ROAD  
DUNNELLO, FL 34432

## 7. Name and Address of New Registered Agent

Name  
PAMELA JOHNSON  
Street Address (P.O. Box Number is Not Acceptable)  
19669 SW 93RD PLACE  
City  
DUNNELLO FL Zip Code  
34432

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 Pamela Johnson PAMELA JOHNSON, PRESIDENT 1/21/08  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

Filing Fee is \$61.25  
Due by May 1, 2008

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KLEIN, MARYLOU 19200 SW 101 PLACE ROAD DUNNELLO, FL 34432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ROSS, ART 18258 SW 99 LANE DUNNELLO, FL 34432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT STRAHAN, AUDREY 19025 SW 93RD LOOP DUNNELLO, FL 34432 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GREEN, LINDA 9242 SE 179TH OSAGE PLACE THE VILLAGES, FL 32162 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DBM JOHNSON, PAM 19669 SW 93RD PLACE DUNNELLO, FL 34432 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PAMELA JOHNSON 19669 SW 93RD PLACE DUNNELLO, FL 34432 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DBM JOHN WYNNE 9105 SW 196TH COURT ROAD DUNNELLO, FL 34432 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Pamela Johnson PAMELA JOHNSON 1/21/08 352-465-8722  
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 4, 2008

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 Rainbow Springs 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.

If further information is needed feel free to contact Eryn Calabro at 245-2939.

Sincerely,

Mike Bullock  
Director  
Florida Park Service

MB/edc

Attachments