FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 25 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N93000003176 (5)**

1. Corporation Name

FRIENDS OF FLORIDA STATE PARKS, INC.

Principal Place of Business	Mailing Address
C/O DEPT. OF ENV. PROT. 3900 COMMONWEALTH BLVD. MS535 TALLAHASSEE FL 32399	P.O. BOX 6633 TALLAHASSEE FL 32314-6633

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/15/1993
3a. Date of Last Report: 04/29/1994
4. FEI Number: ~~APPLIED FOR~~ 59-3207818 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

WERNDLI, PHILLIP A
FL. DEPT. OF ENVIRONMENTAL PROTECTION
3900 COMMONWEALTH BLVD. MS 535
TALLAHASSEE FL 32399

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number Is Not Acceptable)
03
04 City **FL** 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	GRACE, WILLIAM H	1.2 NAME	
STREET ADDRESS	1326 MELALEUCA LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL 33901	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	DELABY, IRENE	2.2 NAME	
STREET ADDRESS	POST OFFICE BOX 2855 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOMOSASSA SPRINGS FL 34447	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	☐ Change ☐ Addition
NAME	KIMBELL, ELSA	3.2 NAME	
STREET ADDRESS	911 N POMPANO	3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33458	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, ALICE	4.2 NAME	
STREET ADDRESS	114 BARBARA CIRCLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MCCLEAN FL	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	☐ Change ☐ Addition
NAME	MAIR, DEAN	5.2 NAME	
STREET ADDRESS	2715 WEKIWA MEADOWS CIRCLE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32712	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, WILSON	6.2 NAME	
STREET ADDRESS	500 S. DUVAL STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32399	6.4 CITY-ST-ZIP	

BM 4/25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Phillip R Werndli 04/24/95 President 407-746-3129
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR — Date — Daytime Phone #

0027644

D
Cobo,Frank
2050 Coral Way
Suite 504
Miami,FL 33145

D
Ekwall,Eleanor
411 Office Plaza Drive
Tallahassee,FL 32301-2756

D
Huiskens,David
1800 Corporate Boulevard NW
Suite 200
Boca Raton,FL 33431

D
Johnson,William
2506 Clemson Drive
Panama City,FL 32405

D
Kellenberger,Louis
3523 Westford Drive
Tallahassee,FL 23308

D
Kenny,Barry
107 West Gaines Street
Tallahassee,FL 32399

D
Lemoine,Eugene N.
1375 Buena Vista Drive
P.O. Box 10000, Suite N/422-C
Lake Buena Vista,FL 32830-1000

D
Pennekamp,Tom
1434 South Miami Avenue
Miami,FL 33130

D
Watterson,Terry
11380 Prosperity Farms Road
Suite 112
Palm Beach Gardens,FL 33410

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Eileen

Department of Environmental Protection

RECEIVED
95 APR 24 AM 9:18
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Lawton Chiles
Governor

Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000

DIRECTOR Virginia B. Wetherell

April 17, 1995

Mr. David Mann, Director
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Dear Mr. Mann:

This letter is to certify to you that the Friends of Florida State Parks, 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.

Sincerely,

Fran P. Mainella

Fran P. Mainella, CLP
Director
Division of Recreation and Parks

FPM/pwc