2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

							,	FILE!	C.	
DOCUMENT # N93000003176								ئىسىئىلىل ئا ئىسىئىلىلىلىن	hand.	
1. Entity Name FRIENDS OF FLORIDA STATE PARKS, INC.							04 JUN 11 PH 2:48			
						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business C/O DEPT. OF ENV. PROT. 3900 COMMONWEALTH BLVD. MS535 TALLAHASSEE, FL 32399 Mailing Address P.O. BOX 6633 TALLAHASSEE, FL 32314-6633										
Principal Place of Business 3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.						ig-NP	CR2E037 (10/03)	
City & State	9 :	City & State					4. FEI Number 59-320781	8		plied For t Applicable
Zip	Zip Country		Zip		Country		5. Certificate of Sta	atus Desired	\$8.75 Add	
	Agent	Name			7. Name and Add	ress of New Reg	istered Agent			
BRYANT, MICHAEL FPS 3900 COMMONWEALTH BLVD. MS 535 TALLAHASSEE, FL 32399					Street Address (P.O. Box Number is Not Acceptable)					
TALLAHAGGEE, FE G2599										
	1 4				City				FL Zip Cod	• .
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 :										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										 _
Filing Fee is \$61.25 Due by May 1, 2004 9. Election Campaign Financing Trust Fund Contribution.							\$5.00 May Be Added to Fees		te check payable to a Department of St	
10.	OFFICERS AND DIF	RECTORS		11.			ADDITIONS/CHANGE	S TO OFFICERS	AND DIRECTORS IN	10
title Name	D LIVINGSTON, RALPH		☐ Delete	TITLE					Change	Addition
STREET ADDRESS 3745 BLUE HERON					ET ADDRESS					
CITY-ST-ZIP	FORT MYERS, FL 33908				ST-ZIP					
TITLE NAME	PB CRADY, GEORGE		☐ Delete	TITLE		D			□ -etiange	Addition
STREET ADDRESS	823 US 17 SOUTH		STRE							
CITY-ST-ZIP	YULEE, FL 32097 ☐ Delete			TITLE	ST-ZIP	PD		0 1	- Change	Addition
NAME	PENNEKAMP, TOM M		EJ DOIGIO	NAME		,,,		HK 1.111]	
STREET ADDRESS CITY-ST-ZIP	3900 COMMONWEALTH MS 535 TALLAHASSEE, FL 32399	5			ET ADDRESS -ST-ZIP			12 18/11		
TITLE			☐ Delete	TITLE		TO			☐ Change	Addition
NAME STREET ADDRESS				NAME STREE	E et address :	Elsa	N. Pompano	Drive		
CITY-ST-ZIP	<u> </u>			CITY-	-ST-ZIP	340		33758		 _
title Name			☐ Delete	TITLE		DS Elau	re mccans	hlin	☐ Change	■ Addition
STREET ADDRESS					ET ADDRESS	5400	o ann ark	por Drive		
CITY-ST-ZIP TITLE			☐ Delete	TITLE	-ST-ZiP	D	eelia, Fo	4 3392	Change	Addition
NAME	·		U Delete	NAME		mic	hael Brua	nt		☐ Addition
STREET ADDRESS CITY-ST-ZIP				1	ET ADDRESS -ST-ZIP	26	Sanchez Uncustine	ave.	L 084	
12. I hereby	certify that the information supplied with			r the exer	mption sta	ted in Se	ction 119.07(3)(i), Fk	orida Statutes. I fu	urther certify that the i	
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: La Klymhanid 4/25/04										
	SIGNATURE AND TYPED OR F	PRINTED NAM	E OF SIGNING OFFICER	OR DIRECT	OR			Cate	Daytime Phone #	



Department of Environmental Protection

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

Colleen M. Castille Secretary

June 7, 2004

Mr. Sean Toner
Division of Corporations
Florida Department of State
409 East Gaines Street
Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to certify to you that 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. Pursuant to F.S. 617.0122. This filing is exempt from any fees when certified by this department.

After filing, please return certified documents to Phillip Werndli at the above address, MS 535. If further information is needed feel free to call him at 245-3098.

Sincerely,

Mike Bullock

Director

Florida Park Service

Mike Bullock

MB/jp

Attachments