2003 NOT-FOR-PROFIT CORPORATION

· U	NIFORM BUS!	NESS	REPOR	lT (UBI	R)		grpon	r «.	
DOCUMENT # N9300003176 1. Entity Name FRIENDS OF FLORIDA STATE PARKS, INC.						FILED 03 FEB 25 PM 12: 06			
			Mailing Address P.O. BOX 6633 TALLAHASSEE FL 32314-6633			SEGNEMARY OF STATE TALLAHASSEE, FLORIDA			
2. Principa	I Place of Business	3. M	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & St	ate		City & State			4. FEI Number 59-3207818 Applied For			
Zip	Country	Z	lip	Country		5. Certificate of S	tatus Desired	□ \$8.75 A	
	6. Name and Address of Cur	rent Registe	t Registered Agent		7. Name and Address of New Registered Agent				
				Nan	ne	7. Hallo Bilo Adi	bress of New Neg	istered Agent	
BRYANT, MICHAEL FPS 3900 COMMONWEALTH BLVD. MS 535 TALLAHASSEE FL 32399				Stre	Street Address (P.O. Box Number is Not Acceptable)				
IALLADA	400EE FL 32399			City				FL Zip Co	ode
8. The above the obligation	re named entity submits this stateme ations of registered agent.	nt for the pur	pose of changing its	s registered offic	ce or registere	ed agent, or both, in	the State of Florid		n, and accept
SIGNATURE	Signature, typed or printed name of registered a	agent and title if ap	plicable, (NOT	TE: Registered Agent s	ignature required	when reinstating)		DATE	
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Florida Department of State			
10.	OFFICERS AND	DIRECTORS		11,		DDITIONO (OL LAND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVINGSTON, RALPH	DINECTONS	Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP		DDITIONS/CHANG	ES TO OFFICERS.	AND DIRECTORS	N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEPPERT, JACK 630 RIVER PLANTATION ROAL CRAWFORDVILLE FL 32327)	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	PD 6-e01 \$23 741e	rge Crao	19 504th 2097	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BRYANT, MICHAEL 26 SANCHEZ AVE ST AUGUSTINE FL 32084		Delete Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP		M. Pennson (Aetange ealth Ms	□ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP		2/125	<u> </u>	Change	Addition
TITLE NAME Street Address City-St-Zip			☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s 1			☐ Change	Addition
TITLE NAME			☐ Delete	TITLE	-			☐ Change	☐ Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

S

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP



Jeb Bush Governor

Department of **Environmental Protection**

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

David B. Struhs Secretary

February 20, 2003

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 fee's 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.

Warmest regards,

Wendy Spencer, Director

Florida Park Service

WS/pwb

Attachments