

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N93000005017 (9)

1. Corporation Name

FRIENDS OF THE MYAKKA RIVER, INC.

Principal Place of Business

1930 CLEMATIS ST  
SARASOTA FL 34239

Mailing Address

1930 CLEMATIS ST  
SARASOTA FL 34239

APPROVED  
AND  
FILED

96 FEB 29 AM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



3. Date Incorporated or Qualified  
11/08/1993

3a. Date of Last Report  
05/01/1995

4. FEI Number  
65-0448875

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

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

8. Name and Address of Current Registered Agent

JELKS, MARY L  
1930 CLEMATIS ST  
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD

JELKS, MARY L

1930 CLEMATIS ST

SARASOTA FL 34239

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD

RICHARDSON, ROBERT

561 ADM HORNBLOWER L

LONGBOAT FL 34228

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD

REEDER, GAIL

4894 PINE GREEN TR

SARASOTA FL 34241

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD

WETHERINGTON, BILLY

3700 S TAMiami TRAIL

SARASOTA FL 34239

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

VD

LISA BOHN

P.O. BOX 185 WA

MYAKKA CITY FL 34251

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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)(d), 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:

Mary L Jelks  
SIGNATURE AND TYPED OR PRINTED NAME OF NONPROFIT OFFICER OR DIRECTOR  
MARY L. JELKS

Jan 17 1996

Date

Daytime Phone #

008588

CR2037 (12/95)



N9300000 5017

## Department of Environmental Protection

Lawton Chiles  
Governor

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

Virginia B. Wetherell  
Secretary

February 23, 1996

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 Myakka River, 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, CLP  
Director  
Division of Recreation and Parks

FPM/pwc