2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

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1. Entity Name
FRIENDS OF THE LOXAHATCHEE RIVER, INC.

Principal Place of Business	Mailing Address
2500 JUPITER PARK DRIVE JUPITER, FL 33458-8964	2500 JUPITER PARK DRIVE JUPITER, FL 33458-8964

01042008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
65-0565394
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SHENKMAN, CURTIS L
DESANTIS, GASKILL, SMITH & SHENKMAN
11891 U.S. HIGHWAY ONE
N PALM BEACH, FL 33408

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

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	THOMPSON, SAWYER
STREET ADDRESS	2500 JUPITER PARK DRIVE
CITY-ST-ZIP	JUPITER, FL 334588964
TITLE	D
NAME	ELLIS, JOSEPH O
STREET ADDRESS	2500 JUPITER PARK DRIVE
CITY-ST-ZIP	JUPITER, FL 334588964
TITLE	D
NAME	DENT, RICHARD C II
STREET ADDRESS	2500 JUPITER PARK DRIVE
CITY-ST-ZIP	JUPITER, FL
TITLE	D
NAME	HOLMES, LORING E
STREET ADDRESS	2500 JUPITER PARK DRIVE
CITY-ST-ZIP	JUPITER, FL
TITLE	D
NAME	YERKES, CLINTON R
STREET ADDRESS	2500 JUPITER PARK DRIVE
CITY-ST-ZIP	JUPITER, FL
TITLE	D
NAME	WHALEN, PAUL J
STREET ADDRESS	2500 JUPITER PARK DR
CITY-ST-ZIP	JUPITER, FL 334588964

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01/15/08-80014-012 61.25

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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: _____ Anna Williams TREASURER 1/11/08 5617475700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # X105