## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # N9500002160

FRIENDS OF GUANA RIVER STATE PARK, INC.

Principal Place of Business 2690 S. PONTE VEDRA BLVD. PONTE VEDRA BCH. FL 32082

2. Principal Place of Business

Mailing Address

2a. Malling Address

2690 S. PONTE VEDRA BLVD. PONTE VEDRA BCH. FL 32082 APPROVES. AND FILED

99 MAR -4 PM 12: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA



3. Date Incorporated or Qualifed

21	26				ביצפו וו טוכט							
Suit	a, Apt. #, etc.	Suite, Apt. #, etc.				•	FEI Number		Ap	plied For		
22		[27]				!	59-3301477		No	Applicable		
City	City & State City & State								\$8.75 A	dditional		
23		28				] 3. (	5. Certificate of Status Desired		Fee Required			
Zip	Country	Zip	Country		6. E		Election Campaign Financing		\$5.00	May Bo		
24	25	29 3	10				Trust Fund Contribution		Added t			
<u> </u>	9. Name and Address of Current					_	Name and Address of New Re	egistered		-		
			81	Na	me							
MARAMAN IPANY												
HARRISON, JERRY				82 Street Address (P.O. Box Number Is Not Acceptable)								
2000 S. PONTE VEDRA BLVD.					83							
PONTE VEDRA BCH. FL 32082										1		
			84	Cit	,				85 Zip (	ode		
								<u>FL</u>				
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of the state of the state of Florida Statutes, the above of statement for the purpose of changing its registered of the statement of the												
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 familial with, and accept the obligations of, Section 617.0503, Florida Statutes.												
SIGNATURE Harris 1/12/99												
SIGITA			Registered Agen	t signa	ure required t	when m	nstating)	DATE	111	——— j		
12.	OFFICERS AN	DIRECTORS	13.			Α	DDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTO	RS IN 12		
TITLE	ΠD	☐ DELETE	1.1 TITLE						Change	☐ Addition		
NAME	ZABORSKY, PAT		12 NAME		- 1							
STREET				1.3 STREET ADDRESS						1		
CITY-ST-				1.4 CITY-ST-ZIP								
TITLE	PD	☐ DELETE	2.1 TITLE	LIF					[] Change	Addition		
NAME	DESELDING, BERT		2.2 NAME		1							
				2.3 STREET ADDRESS						- }		
STREET A				}						]		
CITY-ST-				2.4 City-ST-ZiP								
TITLE	VD.	□ beceie	3.1 TITLE	1					☐ Change	☐ Addition		
NAME	HARRISON, JERRY	3.2			ŀ					1		
STREET A	press 43 QUAIL LN.			3.3 STREET ADDRESS						ļ		
CITY-ST-	JACKSONVILLE BCH. FL 32250		34. CiTY-S	T-ZIP			··					
TILE	ļ D	DELETE	4.1 TITLE		1				Change	Addition		
NAME	HESTER, RANDALL		4.2 NAME									
STREET A	XORESS 2690 S. PONTE VEDRA BLVD.		4.3 STREET	ADDR	SS							
CITY-ST-	PONTE VEDRA BCH. FL 32082		4.4 CITY-S1	-ZIP	_ [							
IIILE	D	☐ DELETE	5.1 TITLE		1		// // -		☐ Change	☐ Addition		
NAME	HARRISON, LINDA		5.2 NAME				N V	10/11		Ì		
STREET A	1		5.3 STREET	STREET ADDRESS			N.	パくしん	t .	1		
CITY-ST-	JACKSONVILLE BCH FL 32250			-2IP			(1)	11	`			
TITLE	E DOMESTITULE DOTT LE DECOU	☐ DELETE	6.1 TITLE		-+				☐ Change	Addition		
NAME			6.2 NAME					ŧ				
STREET A	mocce		63 STREET	ALYCAR	ss					Ì		
			6.4 City-St							Į		
CITY-51-2	P   ereby certify that the information supplied wit	h this filing does not qualify for the			aled in Se	ection	119 07/3Vi) Florida Statutas I	further cod	lifu that the in	formation		

Thereby certify that the information supplied with this filing does not qualify for the exception stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information incompatibilities 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, with all other like empowered.

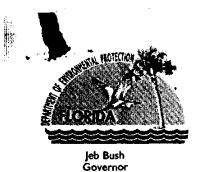
GNATURE:

Bert Best Africa (904) 825–507

SIGNATURE:

01-12-99

(904) 825-5071



## Department of Environmental Protection

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

David B. Struhs Secretary

February 25, 1999

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

Dear Mr. Mann:

This letter is to certify to you that the Friends of Guana River State Park, 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/paw Attachments