## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## 1996 N95000003109 (4) DOCUMENT # FRIENDS OF TAYLOR PARK, INC. Principal Place of Business Mailing Address 139 ROCKLEDGE AVE 139 ROCKLEDGE AVE ROCKLEDGE FL 32955 ROCKLEDGE FL 32955 3. Date Incorporated or Qualified 3a. Date of Last Report 06/26/1995 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State **\$5.00** May Be 6. Election Campaign Financing City & State Added to Fees 28 Trust Fund Contribution 23 8. This corporation has liability for intangible tax under s. 199.032, Country Zip Country Zíp Yes M No Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Just name + Name Vanne ld a CALDWELL, RICK 82 Street Add 139 ROCKLEDGE AVE 83 **ROCKLEDGE FL 32955** 84 City Course FL 85 Zip Code 32953 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 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 accept the obligations of Section 617.0503. Florida Statutes. Director Couldwell Kita SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Namy Caldwell, Kita 12. DELETE ☐ Addition 1.1 TITLE TITLE 1.2 NAME CALDWELL, RICK NAME 139 ROCKLEDGE AVE 1.3 STREET ADDRESS STREFT ADDRESS **ROCKLEDGE FL 32955** 1,4 CITY - ST - ZIP CITY-S1-ZIP Change ■ Addition DELETE 2.1 TITLE HILE 2.2 NAME DICK, MARC NAME 2 3 STREET ADDRESS 21 N FERNWOOD DR STREET ADDRESS 2 4 CITY-ST-ZIP ROCKLEDGE FL 32955 CITY - ST - ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME ECONOMOU, GLORIA NAME 3.3 STREET ADDRESS 1101 S ATLANTIC AVE STREET ADDRESS 3.4 CITY-ST-ZIP New Kerk, Charles COCOA BEACH FL 32931 CITY-ST-ZIP Addition DELETE 4.1 TITLE TITLE 4. 2 NAME **NEWKIRK, CHARLIE** NAME 4.3 STREET ADDRESS 74 N PALMWAY AVE STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP **ROCKLEDGE FL 32955** Addition Change DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHTY-ST-ZIP Change ■ Addition DELETE 6.1 THILE TITLE

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)(k). 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 of trustee introversal to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 18 if phanged, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

64 DITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

OR DIRECTOR

(12/95

CR2E037