

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 MAY 21 PM 12:57

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DOCUMENT # **NA6000002256**
1. Entity Name
Friends of Fanning, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
11650 NW 115 St.
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 354
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Chiefland Fl.

City & State
Chiefland Fl.

Zip
32626

Country
USA

Zip
32644

Country
USA

4. FEI Number
59-3486007

Applied For
 Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Griner, Lynetta U.

Street Address (P.O. Box Number is Not Acceptable)
6551 N.W. 100th St.

Chiefland

City **FL** Zip Code **32626**

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.

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

FEE IS \$61.25 Initial or Amended UBR

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.S.O. Griner, Lynetta U. 6551 N.W. 100th St. Chiefland, Fl. 32626	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.O. McQueen, Carol J. 9207 Florida St. Fanning Springs, Fl. 32693	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	I.O. Smith, Laura A. 9990 NW 175 St. Fanning Springs, Fl. 32693	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jolley, Mary F. 8551 NW 173 Place Fanning Springs, Fl. 32693	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hollingsworth, Shelby 4910 NW 175 St. Fanning Springs, Fl. 32693	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lindsay Ruth A. P.O. Box 1643 Old Town, Fl. 32680	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Lynetta Usher Griner** Date: **04/15/03** Daytime Phone #: **(352) 493-4331**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LYNETTA USHER GRINER, PRES.

CR2E037B (12/01)



Jeb Bush
Governor

Department of Environmental Protection

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

David B. Struhs
Secretary

May 13, 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 Fanning, 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 fees 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