FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortinam

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600005879 (9)

FRIENDS OF THE TRAILS, INC.

Principal Place of Business

Mailing Address

315 14TH AVENUE WEST PALMETTO FL 34221 315 14TH AVENUE WEST

FILED Jun 12 1997 8:00am Secretary of State



PALMETTO FL 34221	PALMETTO FL 34221-4939				
				3. Date Incorporated or Qualified 11/18/1996	3a. Date of Last Report
2. Principal Place of Business 21 529 13 TH STREET WEST	28. Mailing Address 26. P.O. BOX 16	-21		4. FEI Number 23 - 79 47010	Applied For Not Applicable
Suite, Apt. #, etc. 22 SUITE 302	Suite, Apt. #, etc.				\$8.75 Additional Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23 BRADENTON, R	28 BRADENTON			Trust Fund Contribution	Added to Fees
Zip Country	^{Zip} 34205	Countr		8. This corporation has liability for in	
9, Name and Address of Curre	28 - 1 - 3	0 <u>V</u>	5A	Florida Statutes 10. Name and Address of New Reg	Yes No
5, Name and Address of Cults	in negistered Agent	81	Name	TO. Hame and Address of New Reg	hararan Agant
HOLT, KATHY O					
315 14TH AVENUE WEST			Street Addr	ess (P.O. Box Number is Not Acceptable	θ)
PALMETTO FL 34221		83	1		
//		84	City		85 Zip Code
	50 047 4500 FI	41 1		and the second s	<u> FL </u>
11. Pursuant to the provisions of Sections 617,051 office or registered appint, or both; in the state agent. I am is milister in, and speep the solic	be and 617, 1506, Fronda Statoles seef Florida. Such change was aut pations of, Section 617,0503, Florid	thorized b da Statute	y the corporat s.	ion's board of directors. I hereby accep	t the appointment as registered
SIGNATURE Signature syped in printed plame pil legistered ing	ant and title if applicable. (NOTF: F	legislered An	ent signature requir	ed when reinstating)	DATE
	ID DIRECTORS	13.	eri eignatere rodan	ADDITIONS/CHANGES TO OFFICE	
TITLE KATHY O. HOLT	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME PRESIDENT		1.2 NAME			
STREET ADDRESS 315 14TH AVE WE		1.3 STREE	T ADDRESS		
	34221	1.4 C/TY-	ST-ZIP		
TITLE VICE-PERSIDENT	☐ DELETE	2.1 TITLE			Change Addition
	iemy west.	2.2 NAME			
STREET ADDRESS GITU of Braduation	$o(s^{-1})$		T ADDRESS		
CITY-ST-ZIP Gradente PL	DELETE	2.4 CITY- 3.1 TITLE	\$1-ZIP		Change Addition
NAME Lynn beuttch		3.2 NAME			
STREET ADDRESS @24 30th Ave Y	on w D	•	T ADDRESS		
CITY-ST-ZIP Palmetto FL	34221	3.4. CITY -			
TITLE TREASURER	DELETE	4.1 TITLE			Change Addition
NAME Lynn Devitch	.1	4. 2 NAME			†
STREET ADDRESS 824 35th Ave. Dr. C	~ 13	4.3 STREE	T ADDRESS		
CHY-SI-ZIP		4.4 CiTY-5	ST-ZIP		
TITLE	☐ DELETE	5.1 TITL€	-		☐ Change ☐ Addition
NAME		5.2 NAME			
STREET ADDRESS			T ADDRESS		,
CITY-ST-ZIP	DELETE	5.4 CITY - S	ST-ZIP		Change Addillon
NAME		6.2 NAME			C Outside C Worlling
STREET ADDRESS			T ADDRESS		
CITY-ST-ZIP	•	6.4 City-			
44 1 de harely codify that the information duration	of socials and to differ and to the second s	ON CHIT?	or-Air	Un Castina 440 07(0)(1) Fig. (1) Oct. 4-1	16-46

I do nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 trustpe 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 atagenetic field and the same legal effect as if made under oath; that a present in Block 12 or Block 13 if changed, or on an atagenetic field and the same legal effect as if made under oath; that