

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 28, 2005 8:00 am**  
**Secretary of State**

DOCUMENT # N97000003906

1. Entity Name

JUNIPER LAKE CONSERVANCY, INC.



Principal Place of Business

~~300 SQUIREL RD~~ 9 MARION DR.  
DEFUNIAK SPRINGS FL 32433

Mailing Address

~~300 SQUIREL RD~~ 9 MARION DR.  
DEFUNIAK SPRINGS FL 32433

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3528847

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

GALPIN-JOHNSON, SALLY  
9 MARION DRIVE  
DEFUNIAK SPRINGS FL 32433

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

SALLY GALPIN-JOHNSON, PRESIDENT

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/7/05

FILE NOW: FEE IS \$61.25

Due By May 1, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME GALPIN-JOHNSON, SALLY  
STREET ADDRESS 9 MARION DRIVE  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE TD ☐ Delete  
NAME MCKENNEY, PEGGY  
STREET ADDRESS 771 BOB MCCASKILL ROAD  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE D ☒ Delete  
NAME WILSON, BOB  
STREET ADDRESS 1238 CAT ISLAND RD  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE VD ☐ Delete  
NAME STEVENS, BILL STEPHENS  
STREET ADDRESS 350 JUNIPER ISLAND DRIVE  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE SD ☐ Delete  
NAME GOCHENOUR, DEANNA  
STREET ADDRESS 1195 BOB MCCASKILL ROAD  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

TITLE D ☐ Delete  
NAME LEE, LADON LADON  
STREET ADDRESS 411 JUNIPER ISLAND DR  
CITY-ST-ZIP DEFUNIAK SPRINGS FL 32433

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME BILL VANDYCK  
STREET ADDRESS JUNIPER LAKE CAMPGROUND  
CITY-ST-ZIP DEFUNIAK SPRINGS, FL 32433

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sally Galpin-Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/05 850-892-2936

Date

Daytime Phone #