

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004895

1. Entity Name

FRIENDS OF FALLING WATERS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUL 25 AM 10:25

Principal Place of Business

Mailing Address

FALLING WATERS STATE REC AREA
CHIPLEY FL 32425

1365 WATFORD CIR
CHIPLEY FL 32428

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3551705

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

ROBINSON, A.A.
846 ORANGE HILL ROAD
CHIPLEY FL 32428

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME FOSTER, JOHN
STREET ADDRESS 1365 WATFORD CIRCLE
CITY-ST-ZIP CHIPLEY FL 32428 ☐ Delete

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

TITLE T
NAME FOSTER, KATHY
STREET ADDRESS 1365 WATFORD CIRCLE
CITY-ST-ZIP CHIPLEY FL 32428 ☐ Delete

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

TITLE D
NAME PARKMAN, DORIS
STREET ADDRESS 1791 TRANQUIL COURT
CITY-ST-ZIP CHIPLEY FL 32428 ☐ Delete

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

TITLE DS
NAME MCGLAMMERY, JO
STREET ADDRESS P.O. BOX 525
CITY-ST-ZIP COTTONDALE FL 32431 ☐ Delete

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

TITLE D
NAME DEAN, BECKY
STREET ADDRESS 631 4TH STREET
CITY-ST-ZIP CHIPLEY FL 32428 ☐ Delete

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

TITLE VD
NAME LAVENDER, FRED
STREET ADDRESS P.O. BOX 236 N/A
CITY-ST-ZIP CHIPLEY FL 32428 ☐ Delete

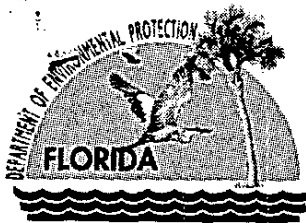
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE: JOHN V. FOSTER 7-8-01

CR2E037 (5/01)



Jeb Bush
Governor

-2-

Department of Environmental Protection

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

David B. Struhs
Secretary

July 27, 2001

Ms. Cathy Stauffer
Division of Corporations
Florida Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Dear Ms. Stauffer:

This letter is to certify to you that Friends of Falling Waters, 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 fee's 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 488-8243.

Sincerely,

Mike Bullock
Acting Director
Division of Recreation and Parks

MB/pwb

Attachments