

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000002286

1. Entity Name
FRIENDS OF ICHETUCKNEE SPRINGS STATE PARK,
INC.



Principal Place of Business
196 SW MISSION SPRINGS COURT
FORT WHITE, FL 32038

Mailing Address
P.O. BOX 501
FORT WHITE, FL 32038

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01112008

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-3480044

Applied For
Not Applicable

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

HARPER, CRAIG A
6252 SW ELIM CHURCH ROAD
FORT WHITE, FL 32038

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

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	C	<input checked="" type="checkbox"/> Delete
NAME	MCKENZIE, SHELIA	
STREET ADDRESS	286 SW HAWKINS CT	
CITY-ST-ZIP	FORT WHITE, FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	HARPER, CRAIG	
STREET ADDRESS	6252 SW ELIM CHURCH RD	
CITY-ST-ZIP	FORT WHITE, FL	
TITLE	C	<input checked="" type="checkbox"/> Delete
NAME	CULVERHOUSE, BEN	
STREET ADDRESS	JUNCTION ROAD	
CITY-ST-ZIP	FORT WHITE, FL 32038	
TITLE	C	<input type="checkbox"/> Delete
NAME	HARPER, CHESTER	
STREET ADDRESS	6252 SW ELIM CHURCH RD	
CITY-ST-ZIP	FORT WHITE, FL 32038	
TITLE	C	<input type="checkbox"/> Delete
NAME	RICHARDSON, LINDA	
STREET ADDRESS	386 SW TEXAS LANE	
CITY-ST-ZIP	FORT WHITE, FL 32038	
TITLE	DV	<input type="checkbox"/> Delete
NAME	WRAY, VERNIS	
STREET ADDRESS	8587 SW ELIM CHURCH ROAD	
CITY-ST-ZIP	FORT WHITE, FL 32038	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sandra Johnson	
STREET ADDRESS	5W Aries Ct.	
CITY-ST-ZIP	Fort White, FL 32038	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Helen Williams	
STREET ADDRESS	US Hwy 27	
CITY-ST-ZIP	Fort White, FL 32038	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

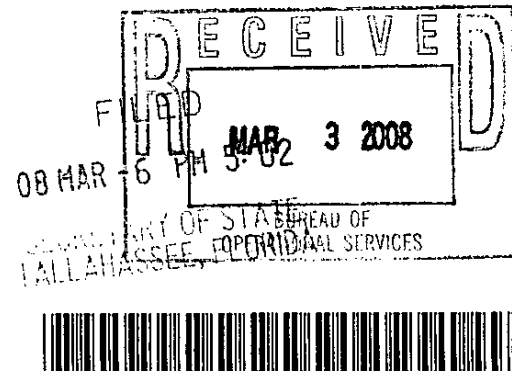
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/08

386 623 6304

Date

Daytime Phone #





Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

March 4, 2008

Mr. Sean Toner
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Toner:

This letter is to certify to you that the Friends of Ichetucknee Springs State Park, 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.

If further information is needed feel free to contact Eryn Calabro at 245-2939.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/edc

Attachments