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2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000005088

1. Entity Name
FRIENDS OF WASHINGTON OAKS GARDENS STATE
PARK, INC.



Principal Place of Business
6400 N OCEAN SHORE BLVD
PALM COAST, FL 32137

Mailing Address
6400 N OCEAN SHORE BLVD
PALM COAST, FL 32137

FILED

Revised Form
mailed 5/31/07
CLASSEE, FLORIDA



04242007 Chg-NP

CR2E037: (12/06)

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3546523

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

BOUCK, ROBERT
52 JASMINE DRIVE
PALM COAST, FL 32137

Name

Same (no changes)

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

Robert Bouck

5/1/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	T NICHOLS, CAROL 69 S. DIXIE HIGHWAY ST. AUGUSTINE, FL 32095	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BOUCK, ROBERT 52 JASMINE DRIVE PALM COAST, FL 32137	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GAWTHROP, SHELIA 2401 SWORDFISH LN EDGEWATER, FL 32141	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SULSER, JUDY 11 CRAMPTON COURT PALM COAST, FL 32137	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PERRY, NANCY 821 KALLI CREEK LANE ST AUGUSTINE, FL 32080	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD CONNER, TIM 2 JUNGLE HUT RD, SUITE #1 PALM COAST, FL 32137	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD Gawthrop, Sheila 2401 Swordfish Lane Edgewater, FL 3214	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Conner, Tim 2 Jungle Hut Rd, St#1 Palm Coast, FL 32137	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD Liz Morrison 119 Wynnfield Dr. Palm Coast, FL 32164	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD Whitney Pirnat 6 Cayuse Ct. Palm Coast, FL 32137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD Denby, Don 70 Lagare Street Palm Coast, FL 32137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	BOD Sharon Searles 3 Avenue Monet Palm Coast, FL 32137	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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

Robert Bouck

Robert Bouck

5/1/07

Date

Daytime Phone #



Florida Department of Environmental Protection

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

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Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 20, 2007

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 Washington Oaks Gardens 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.

After filing, please return certified documents to Eryn Calabro at the above address, MS 535. If further information is needed feel free to call her at 245-2939.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/edc

Attachments