

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

07 Jun 6 AM 10:15

CLERK OF STATE
TALLAHASSEE, FLORIDA

bb011938

DOCUMENT # N98000007334 1. Entity Name FRIENDS OF THE CHARLOTTE HARBOR AQUATIC PRESERVES, INC.					
Principal Place of Business 12301 BURNT STORE ROAD PUNTA GORDA, FL 33955			Mailing Address 12301 BURNT STORE ROAD PUNTA GORDA, FL 33955		
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	4. FEI Number 65-0911036	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FLESHMAN, BARBARA CHARLOTTE HARBOR AQUATIC & STATE BUFFER 12301 BURNT STORE ROAD PUNTA GORDA, FL 33955			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10. OFFICERS AND DIRECTORS </div> <div style="width: 45%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 </div> </div>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DONLEY, LIZ 5473 HENLEY STREET BOKEELIA, FL 33922 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VICE PRESIDENT CHACK GERTNER 24194 PIRATE HARBOR BLVD. PUNTA GORDA, FL 33955 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BICKFORD, KAREN 1165 PALM AVENUE #3A NORTH FT MYERS, FL 33903 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MALVIK, SUSAN 176 GODFREY AVE #3A PORT CHARLOTTE, FL 33952 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LINDA SUE GERTNER 24194 PIRATE HARBOR BLVD PUNTA GORDA, FL 33955 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLESHMAN, BARBARA 15550 BURNT STORE ROAD #46 PUNTA GORDA, FL 33955 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KATZ, WILMA 123 JOSE GASPAR DRIVE ENGLEWOOD, FL 34223 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANIELSON, LYLE 12770 WATERFORD CIRCLE APT #312 FT MYERS, FL 33919 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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: <u><i>Elizabeth L. Donley</i></u> 4/24/2007 239.338.2556 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					



ATTACHMENT # 66011958
N98000007334
Florida Department of
Environmental Protection

Charlotte Harbor Preserve State Park
12301 Burnt Store Road
Punta Gorda, Florida 33955
941-575-5861

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 24, 2007

Mr. Sean Toner, Administrative Supervisor
Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear Mr. Toner:

Enclosed is the 2007 Not-For-Profit Corporation Annual Report (Document # N98000007334) for the Friends of the Charlotte Harbor Aquatic Preserves, Inc. (FCHAP). Also enclosed is a copy of the original letter written in 1998 to the Director of the Division of Corporations from the then Assistant Chief of the Office of Coastal and Aquatic Managed Areas (CAMA) confirming the status of FCHAP as a duly authorized Citizen Support Organization (CSO) in accordance with Section 370.0205, Florida Statutes.

On behalf of the Friends, I would like to request that the Annual Filing Fee of \$61.25 continue to be waived as usual and as is customary for CSOs associated with the Florida State Parks and other government branches within the Florida Department of Environmental Protection. Our CSO supports the DEP's Charlotte Harbor Aquatic Preserves and Charlotte Harbor Preserve State Park and uses their facilities and equipment in the implementation of management plans for the Aquatic Preserves and the Preserve State Park in accordance with Section 370.0205 of the Florida Statutes. Your assistance with this matter is greatly appreciated.

Sincerely,

Carla Kappmeyer-Sherwin

Carla Kappmeyer-Sherwin, Environmental Specialist I
DEP Liaison / Friends of the Charlotte Harbor Aquatic Preserves
e-mail: carla.kappmeyer-sherwin@dep.state.fl.us