

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 8:00 am
Secretary of State

01-21-2005 90057 021 ****61.25

DOCUMENT # N99000004755

1. Entity Name
FRIENDS OF THE CARPENTER, INCORPORATED



Principal Place of Business
104 N. WOLFF ST.
FERNANDINA BEACH, FL 32034

Mailing Address
104 N. WOLFF ST.
FERNANDINA BEACH, FL 32034

50005130



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01172005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
- 59-3590665

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

GRACE, WILLIAM P III
104 N. WOLFF ST.
FERNANDINA BEACH, FL 32034

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, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME GRACE, WILLIAM P III
STREET ADDRESS 104 N. WOLFF ST.
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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

TITLE D ☒ Delete
NAME RICH, JEANETTE M
STREET ADDRESS 211 SOUTH 10TH ST.
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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

TITLE D ☐ Delete
NAME GRACE, GAIL C
STREET ADDRESS 104 N. WOLFF ST.
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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

TITLE D ☐ Delete
NAME STOUGHTON, LINCOLN D
STREET ADDRESS 2550 VIA DEL REY
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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

TITLE C ☐ Delete
NAME SHEFFIELD, GEORGE
STREET ADDRESS 1560 CANOPY DRIVE
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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

TITLE D ☐ Delete
NAME JONES, BRUCE DR
STREET ADDRESS 621 CENTRE STREET
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

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:

WILLIAM P. GRACE III

William P. Grace III

19 JAN 05

904 321-1367

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #