

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000498

Entity Name: FRIENDS OF THE PORT ST. LUCIE BOTANICAL GARDENS, INC.**Current Principal Place of Business:**2410 SE WESTMORELAND BLVD
PORT ST. LUCIE, FL 34952**Current Mailing Address:**2410 SE WESTMORELAND BLVD
PORT ST. LUCIE, FL 34952 US**FEI Number: 26-1431561****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BARNES, MARK T CPA
2410 SE WESTMORELAND BLVD
PORT ST. LUCIE, FL 34952 US*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:** MARK T BARNES

04/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FURNARI, HEATHER
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title TREASURER
Name MABRY, CHERI
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title SECRETARY
Name NASH-WADE, JUDY
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR
Name PATRONE, MARY
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR
Name ERICKSON, JOHN
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title VP
Name KOSTIVAL, JEANETTE
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR
Name JOHNSON, DALE
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR
Name KING, JOLEEN
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: HEATHER FURNARI

PRESIDENT

04/08/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HILL, MOSSES
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST. LUCIE FL 34952

Title DIRECTOR
Name SUTTON, TIM
Address 2410 SE WESTMORELAND BLVD
City-State-Zip: PORT ST LUCIE FL 34952