

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006260

Entity Name: FRIENDS OF TOMOKA BASIN STATE PARKS, INC.

Current Principal Place of Business:

3501 OLD KINGS ROAD
FLAGLER BEACH, FL 32136

Current Mailing Address:

P.O. BOX 1035
BUNNELL, FL 32110 US

FEI Number: 46-3862922

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUPONT, HEWITT J
1515 HERBERT STREET, SUITE 213
PORT ORANGE, FL 32129 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FISKE, JAMES
Address 11 RENWORTH PLACE
City-State-Zip: PALM COAST FL 32164

Title VP
Name BIRKHEAD, NANCY DR.
Address 92 PARKVIEW DRIVE
City-State-Zip: PALM COAST FL 32164

Title TREASURER
Name DUPONT, HEWITT
Address 1515 HERBERT ST SUITE 213
City-State-Zip: PORT ORANGE FL 32129

Title S
Name COOK, CATHY
Address 60 ROCKEFELLER DR
City-State-Zip: PALM COAST FL 32164

Title D
Name MATHEN, THEA
Address PO BOX 190
City-State-Zip: BUNNELL FL 32110

Title D
Name BITGOOD, STEPHEN DR
Address 29 SUNRISE VILLAS LANE
City-State-Zip: PALM COAST FL 32164

Title D
Name MORLEY, ADAM
Address 1205 EAST SR 206
City-State-Zip: ST AUGUSTINE FL 32086

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: HEWITT J DUPONT

TREASURER

01/24/2017

Electronic Signature of Signing Officer/Director Detail

Date