

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21189

**Entity Name:** FRIENDS OF THE ISLAMORADA AREA STATE PARKS, INC .**Current Principal Place of Business:**84900 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036**Current Mailing Address:**P.O. BOX 236  
ISLAMORADA, FL 33036**FEI Number:** 65-0028954**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MIKLAS, JOE  
MILE MARKER 88.7  
TAVERNIER, FL 33070 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	D
Name	SYLVESTER, EILEEN
Address	166 GULFVIEW DR.
City-State-Zip:	ISLAMORADA FL 33036

Title	PD
Name	STROBEL, KAREN
Address	165 CORAL RD.
City-State-Zip:	ISLAMORADA FL 33036

Title	DVP
Name	MITCHELL, PHYLLIS
Address	82242 OVERSEAS HIGHWAY
City-State-Zip:	ISLAMORADA FL 33036

Title	DT
Name	HARING, SKIP
Address	68300 OVERSEAS HWY
City-State-Zip:	LONG KEY FL 33001

Title	D
Name	KIRCHNER, ELLE
Address	155 CORT LANE
City-State-Zip:	TAVERNIER FL 33070

Title	DE
Name	KIRCHNER, ELIE
Address	155 CORT LANE
City-State-Zip:	TAVERNIER FL 33070

*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:** SKIP HARING**TREASURER****03/21/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date