

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38388

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC9909979940**

**Entity Name:** FRIENDS OF MACARTHUR BEACH STATE PARK, INC.

**Current Principal Place of Business:**

10900 JACK NICKLAUS DRIVE  
N PALM BCH, FL 33408

**Current Mailing Address:**

10900 JACK NICKLAUS DRIVE  
N PALM BCH, FL 33408

**FEI Number:** 65-0196497

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MILLER, EDITH D.  
11279 OLD HARBOUR ROAD  
NORTH PALM BEACH, FL 33408 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:** EDITH D. MILLER

01/09/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name WOODS, AMY  
Address 702 SUN TERRACE COURT  
City-State-Zip: PALM BEACH GARDENS FL 33403

Title TREASURER  
Name REED, HAROLD  
Address 12298 INDIAN ROAD  
City-State-Zip: NORTH PALM BEACH FL 33408

Title PRESIDENT  
Name MILLER, EDITH D.  
Address 11279 OLD HARBOUR ROAD  
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP  
Name MAAS, PHYLLIS  
Address 1860 FOREST HILL BLVD.  
STE. 204  
City-State-Zip: WEST PALM BEACH FL 33406

Title AT  
Name HOPKINS, MARY S  
Address 9121 N. MILITARY TRAIL, #222  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** EDITH D. MILLER

**PRESIDENT**

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date