

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005088

FILED
Jan 18, 2018
Secretary of State
CC4464129803

Entity Name: FRIENDS OF WASHINGTON OAKS GARDENS STATE PARK, INC.

Current Principal Place of Business:

6400 N OCEANSHORE BLVD
PALM COAST, FL 32137

Current Mailing Address:

6400 N OCEANSHORE BLVD
PALM COAST, FL 32137

FEI Number: 59-3546523

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROWLEY, LUCY PRES
31 DEERFIELD COURT
PALM COAST, FL 32137 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: LUCY CROWLEY

01/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name DIEDO , KAREN
Address 22 INDIANHEAD DRIVE
City-State-Zip: ORMOND BEACH FL 32176

Title TREASURER
Name ALONGI, FRAN
Address 1438 CARLOW CIRCLE
City-State-Zip: ORMOND BEACH FL 32174

Title BOD
Name BURNS , DAVID
Address 42 ARROWHEAD DRIVE
City-State-Zip: PALM COAST FL 32137

Title BOD
Name HAWREY , SHIRLEY
Address 17 CHEROKEE COURT EAST
City-State-Zip: PALM COAST FL 32137

Title BOD
Name HARRIS , JOAN
Address 1619 S. DAYTONA AVE
City-State-Zip: FLAGLER BEACH FL 32136

Title PRES
Name CROWLEY , LUCY
Address 31 DEERFIELD COURT
City-State-Zip: PALM COAST FL 32137

Title BOD
Name DEVITO , BOB
Address 41 ARROWHEAD DRIVE
City-State-Zip: PALM COAST FL 32137

Title SECRETARY
Name MINICH , PHYLLIS
Address 10 F STREET
City-State-Zip: ST. AUGUSTINE FL 32080

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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: LUCY CROWLEY

PRESIDENT

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOD
Name DULL, BRUCE
Address 260 BEACHWAY DRIVE
City-State-Zip: PALM COAST FL 32137