

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005088

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

04/02/2020

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 BYRD, ELAYNE
Address 1 SAN MARCO COURT
City-State-Zip: PALM COAST FL 32137

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

Title BOD
Name NELMS, DIANE
Address 80 SURFVIEW DRIVE
104
City-State-Zip: PALM COAST FL 32137

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

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

Continues on page 2

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

04/02/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	BOD
Name	MORENO, VICTORIA
Address	17 SAN JOSE DRIVE
City-State-Zip:	PALM COAST FL 32137