

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 07, 2005
Secretary of State**

DOCUMENT# 728832

Entity Name: FRIENDS OF WLRN, INC.

Current Principal Place of Business:

172 N.E. 15TH STREET
ATTN: KAREN ECHOLS
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

172 N.E. 15TH STREET
ATTN: KAREN ECHOLS
MIAMI, FL 33132

New Mailing Address:

FEI Number: 23-7365001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHOLS, KAREN
172 NE 15TH STREET
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: BLECHMAN, RACHEL
Address: 701 BRICKELL AVE. #3000
City-St-Zip: MIAMI, FL 33131

Title: VC () Delete
Name: DUSSEAU, CHARLES
Address: 7520 SW 72ND COURT
City-St-Zip: MIAMI, FL 33143

Title: T (X) Delete
Name: IGLESIAS, ABEL
Address: 255 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

Title: S (X) Delete
Name: GOONEN, NORMA
Address: 3301 COLLEGE AVE
City-St-Zip: FT LAUDERDALE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIS, RICK
Address: 172 NE 15TH STREET
City-St-Zip: MIAMI, FL 33132

Title: C (X) Change () Addition
Name: DUSSEAU, CHARLES
Address: 7520 SW 72ND COURT
City-St-Zip: MIAMI, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KAREN E ECHOLS

CFO

01/07/2005

Electronic Signature of Signing Officer or Director

_____ Date