2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751571

FILED Feb 08, 2004 Secretary of State

Entity Name: FRIENDS OF THE SAENGER, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 13666

PENSACOLA, FL 32591 US

Current Mailing Address: New Mailing Address:

P. O. BOX 13666

PENSACOLA, FL 32591 US

FEI Number: 59-2015462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEE, DOUG 118 S. PALAFOX STREET PENSACOLA, FL 32501 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: WEEKS, SHERRI Name: WEEKS, SHERRI

Address: 5100 N. 9TH AVE D-425 Address: 3039 KEATS DR
City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32503

Title:TD() DeleteTitle:TD(X) Change () AdditionName:GROSS, MRS. JOHN,Name:GROSS, PATRICIA SAddress:2706 BLACKSHEARAddress:2706 BLACKSHEAR AVE

Address. 2706 BLACKSHEAR AVE
City-St-Zip: PENSACOLA, FL City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete Title: D (X) Change ().

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 QUINA, CARTER
 Name:
 DOLORES DE LA RUA HA, YES

 Address:
 400 W. ROMANA ST.
 Address:
 3131 LEESBURG SQUARE

 City-St-Zip:
 PENSACOLA, FL 32504
 PENSACOLA, FL 32504

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: PATRICIA S. GROSS TREA 02/08/2004