

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000297

FILED  
May 01, 2008  
Secretary of State

Entity Name: FRIENDS OF THE PARK AT STRANAHAN HOUSE, INC.

**Current Principal Place of Business:**

335 SE SIXTH AVE  
FT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

335 SE SIXTH AVE  
FT LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 20-0661127      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CORPORATION COMPANY OF MIAMI, INC.  
200 E BROWARD BLVD  
STE 2000(SKT)  
FT LAUDERDALE, FL 33301 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: P      ( ) Delete  
Name: STRAWBRIDGE, SCOTT  
Address: 1821 MIDDLE RIVER DRIVE APT. 7  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: S      ( ) Delete  
Name: LEGETTE, JANE  
Address: 2728 NE 19TH ST  
City-St-Zip: FT LAUDERDALE, FL

Title: D      ( ) Delete  
Name: GALLO, BILL  
Address: 1311 NEWPORT CENTER DR W  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D      ( ) Delete  
Name: MADSEN, CHRIS  
Address: 5203 NW 33 AVE  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D      ( ) Delete  
Name: BUCKLEY, CINDY  
Address: 126 NE 17 AVE  
City-St-Zip: FORT LAUDERDALE, FL 33301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 exemption stated in Chapter 119, 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: SCOTT STRAWBRIDGE

P

05/01/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date