

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003453

FILED
Apr 25, 2006
Secretary of State

Entity Name: FRIENDS OF INTELLIGENCE PRACTITIONERS, INC.

Current Principal Place of Business:

19443 WATERS CURVE WAY
WATERS REACH #802
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

19443 WATERS CURVE WAY
WATERS REACH #802
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 54-2172610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAXTON, WILLIAM A
19443 WATERS CURVE WAY
WATERS REACH #802
BOCA RATON, FL 33434 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: SAXTON, WILLIAM A PHD
Address: 19443 WATERS CURVE WAY
City-St-Zip: BOCA RATON, FL 33434 US

Title: VSTD () Change (X) Addition
Name: SAXTON, LYNN S
Address: 19443 WATERS CURVE WAY
City-St-Zip: BOCA RATON, FL 33434 US

Title: D () Change (X) Addition
Name: WINOKUR, TERRY
Address: 6529 COLOMERA DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM A. SAXTON

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date