

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 04, 2009
Secretary of State**

DOCUMENT# N08000010575

Entity Name: FRIENDS OF LITTLE RIVER ELEMENTARY SCHOOL, INC.

Current Principal Place of Business:

C/O TERREMARK WORLDWIDE, INC.
ONE BISCAYNE TOWER 2 S BISCAYNE BLVD #2900
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

C/O TERREMARK WORLDWIDE, INC.
ONE BISCAYNE TOWER 2 S BISCAYNE BLVD #2900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 26-3827395 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:

ROBES, ROBERT J
1221 BRICKELL AVENUE
MIAMI, FL 33131 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:

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: MORGAN, BETH D
Address: 2 BISCAYNE BLVD., SUITE 2900
City-St-Zip: MIAMI, FL 33131

Title: SD () Change (X) Addition
Name: SMITH, ADAM
Address: 2 BISCAYNE BLVD., SUITE 2900
City-St-Zip: MIAMI, FL 33131

Title: TD () Change (X) Addition
Name: GONZALEZ, XAVIER
Address: 2 BISCAYNE BLVD., SUITE 2900
City-St-Zip: MIAMI, FL 33131

Title: D () Change (X) Addition
Name: MEDINA, MANUEL D
Address: 2 BISCAYNE BLVD., SUITE 2900
City-St-Zip: MIAMI, FL 33131

Title: D () Change (X) Addition
Name: HOFFMAN, JOHN
Address: 2 BISCAYNE BLVD., SUITE 2900
City-St-Zip: MIAMI, FL 33131

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: ADAM SMITH

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05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date