

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008643

FILED
Jan 05, 2011
Secretary of State

Entity Name: FRIENDS OF RAYMOND JAMES, INC.

Current Principal Place of Business:

880 CARILLON PARKWAY
ATTN: E ERIKSEN, 12G00
ST. PETERSBURG, FL 33716

New Principal Place of Business:

Current Mailing Address:

880 CARILLON PARKWAY
ATTN: E ERIKSEN, 12G00
ST. PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 05-0540150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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
Name: HARTZ, RONALD
Address: 880 CARILLON PKWY ST.
City-St-Zip: ST PETERSBURG, FL 33716

Title: T
Name: ERIKSEN, ELIZABETH
Address: 880 CARILLON PARKWAY
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D
Name: VALDEZ, JULIE
Address: 880 CARILLON PKWY
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: S
Name: WATSON, DENISE
Address: 880 CARILLON PKWY ST.
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D
Name: KNIGHT, JIM
Address: 880 CARILLON PKWY
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D
Name: KISSNER, MARY J
Address: 880 CARILLON PKWY
City-St-Zip: SAINT PETERSBURG, FL 33716

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH ERIKSEN

T

01/05/2011

Electronic Signature of Signing Officer or Director

_____ Date