

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009805

Entity Name: FRIENDS-SUPPORT INC.**Current Principal Place of Business:**510 E. SADIE ST.
BRANDON, FL 33510**Current Mailing Address:**P.O. BOX 677
BRANDON, FL 33509 US**FEI Number:** 65-1261646**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MASTELLA, THERESA A
4607 PORTOBELLO CIRCLE
VALRICO, FL 33596 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**Officer/Director Detail :**

Title	PRESIDENT
Name	FOYT, ANN
Address	5913 GRAND LONEOAK LANE
City-State-Zip:	LITHIA FL 33547

Title	VP
Name	SPINKS, TINA
Address	945 NORMANDY TRACE RD
City-State-Zip:	TAMPA FL 33602

Title	COMMUNICATIONS
Name	STEPHENSON, ALICIA
Address	1637 GUNSMITH DR.
City-State-Zip:	LUTZ FL 33559

Title	TREASURER
Name	BASILICO-RILEY, BARBARA
Address	8302 N. ROME AVE
City-State-Zip:	TAMPA FL 33604

Title	SECRETARY
Name	PITTS, TARA
Address	5005 CLAYMORE DR. #103
City-State-Zip:	TAMPA FL 33610

Title	D
Name	JAHNKE, LYNN LSCW
Address	505 CENTERBROOK DR.
City-State-Zip:	BRANDON FL 33511

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: BARBARA BASILICO-RILEY**TREASURER****04/29/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date