

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006793

Entity Name: EAST CENTRAL FLORIDA FRIENDSHIP FORCE, INC.**Current Principal Place of Business:**

C/O ZAYNE SIBLEY
806 16TH AVENUE
NEW SMYRNA BEACH, FL 32169-3408

Current Mailing Address:

C/O ZAYNE SIBLEY
806 16TH AVENUE
NEW SMYRNA BEACH, FL 32169-3408 US

FEI Number: 45-1653646**Certificate of Status Desired: No****Name and Address of Current Registered Agent:**

SIBLEY, ZAYNE
806 16TH AVENUE
NEW SMYRNA BEACH, FL 32169-3408 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 PD
Name CARPENTER, PATRICIA
Address 5300 S. ATLANTIC AVE.
BLDG ONE, ##205
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VD
Name GILLISSE, JOYCE
Address 3035 ROYAL PALM DRIVE
City-State-Zip: EDGEWATER FL 32141-6120

Title D
Name LANG, URSULA
Address 805 SCHOOLWAY AVENUE #210
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title SD
Name MAY, CHRISTINE
Address 822 E 19TH AVENUE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title TD
Name SIBLEY, ZAYNE
Address 806 E 16TH AVENUE
City-State-Zip: NEW SMYRNA BEACH FL 32169-3408

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: ZAYNE SIBLEY**TREASURER****04/21/2013**

Electronic Signature of Signing Officer/Director Detail

Date