

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706247

FILED  
May 02, 2006  
Secretary of State

**Entity Name:** SOUTHEASTERN YEARLY MEETING, RELIGIOUS SOCIETY OF FRIENDS, INC.

**Current Principal Place of Business:**

312 BANYAN WAY  
MELBOURNE BEACH, FL 32951

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 510795  
MELBOURNE BEACH, FL 329510795

**New Mailing Address:**

**FEI Number:** 59-1226463      **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:**

COPE-ROBINSON, LYN  
312 BANYAN WAY  
MELBOURNE BEACH, FL 32951      US

**Name and Address of New Registered Agent:**

COPE, LYN  
312 BANYAN WAY  
MELBOURNE BEACH, FL 32951      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: LYN COPE

05/02/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T      ( ) Delete  
Name: ANDERSEN, NEIL  
Address: 98 FOX RUN CIRCLE  
City-St-Zip: CRAWFORDVILLE, FL 323272486 US

Title: P      ( ) Delete  
Name: TAYLOR, SUSAN  
Address: 1505 KOLPAKIN NENE  
City-St-Zip: TALLAHASSEE, FL 323014731 US

Title: AS      ( ) Delete  
Name: LESNICK, ED  
Address: 2601 BENT HICKORY CIRCLE  
City-St-Zip: LONGWOOD, FL 327792634 US

Title: BD      ( ) Delete  
Name: ANDERSEN, PHOEBE  
Address: 98 FOX RUN CIRCLE  
City-St-Zip: CRAWFORDVILLE, FL 323272486 US

Title: VP      ( ) Delete  
Name: BRENNAN, SYBIL  
Address: 22151 NE 151ST LANE  
City-St-Zip: SALT SPRINGS, FL 321347109 US

Title: P      ( ) Delete  
Name: FENNELL, NANCY  
Address: 52 FENNY BOSK TRAIL  
City-St-Zip: VENUS, FL 339602155 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LYN COPE

ADMI

05/02/2006

Electronic Signature of Signing Officer or Director

Date