

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Jan 15 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 732402 (3)**

1. Corporation Name  
**FRIENDS FOR LIFE, INC.**



Principal Place of Business <b>ESTER RUCKET 5603 MULBERRY DR TAMARAC FL 33319 US</b>	Mailing Address <b>ESTER RUCKET 5603 MULBERRY DR TAMARAC FL 33319 US</b>
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3. Date Incorporated or Qualified  
**04/09/1975**

4. FEI Number  
**23-7422280**

Applied For	
Not Applicable	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>28</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>26</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**KNIGHT, JAMES E.  
3890 W. COMMERCIAL BLVD.  
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *ESTER RUCKET TD* DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>TD</b>	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RUCKET, ESTER</b>		1.2 NAME	
STREET ADDRESS <b>5603 MULBERRY DRIVE</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>TAMARAC FL 33319</b>		1.4 CITY-ST-ZIP	
TITLE <b>P</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HORNE, GERRY S</b>		2.2 NAME	
STREET ADDRESS <b>4805 BAY BERRY LANE</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>TAMARAC FL 33319</b>		2.4 CITY-ST-ZIP	
TITLE <b>SD</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PLATZ, GRACE</b>		3.2 NAME	
STREET ADDRESS <b>5410 BANYAN LN</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>TAMARAC FL</b>		3.4 CITY-ST-ZIP	
TITLE <b>VD</b>	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>GRUBER, SYLVIA</b>		4.2 NAME	
STREET ADDRESS <b>5200 WOODLAND DR</b>		4.3 STREET ADDRESS	
CITY-ST-ZIP <b>TAMARAC FL</b>		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *ESTER RUCKET* DATE: \_\_\_\_\_

CR2E037 (10/97)

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