

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # 734377 1. Entity Name THE FRIENDLY NATIVE BEACH RESORT CONDOMINIUM, INC.					
Principal Place of Business 6700 SUNSET WAY ST PETERSBURG BEACH FL 33706-2053		Mailing Address 6700 SUNSET WAY ST PETERSBURG BEACH FL 33706-2053			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1656341	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HURLEY, J. K 6700 SUNSET WAY ST PETERSBURG BEACH FL 33706				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature is required when changing) DATE _____					
FILE NOW: FEE IS \$61.25 Due By: May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRISSORA, TED 643 WHITETAIL DR GAHANG OH		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition U00000803230 02/05/08-80017-011	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MARTINS, JOHN 6 LINKS LN BRAMPRON, ONTARIO CANADA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALMERICO, MARJORIE 807 W INDIANA AVE. TAMPA FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GARCIA, DULCE MARIA V 4808 DARBY AVE. TAMPA FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWENSON, GLENN 3521-6TH AVE.,N. ST.PETERSBURG FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ A G 908 W VIRGINIA AVE TAMPA FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dulce Maria V. Garcia* 1/23/2008 812-872-0310