2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 12, 2005 08:00 AM Secretary of State DOCUMENT # 747481 FRIENDS AND CHRIST TOGETHER, INCORPORATED Principal Place of Business Mailing Address 4215 76TH STREET WEST 4215 76TH STREET WEST BRADENTON FL 34209 **BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. EEI Number Applied For 59-2037185 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUGHES, KENNETH Street Address (P.O. Box Number is Not Acceptable) 4215 76TH STREET WEST **BRADENTON FL 33505** Zip Code FI. 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 Signature, typed or crimted name of registered agent and title if applicable INOTE. Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to \Box Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10, 11. PD Addition ☐ Change MILE Delete TUTLE U000000226232 HUGHES, KENNETH NAME NAME 02/12/05-80007-021 61.25 4215 76TH STREET W. STREET ADDRESS STREET ADDRESS BRADENTON FL CITY - ST - ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete HUGHES, PATRICIA 4215 76TH STREET W. STREET ADDRESS STREET ADDRESS BRADENTON FL CHY-ST-ZIP CHY-SI-ZIP TITLE 🔲 Delete 11111.5 ☐ Change Addition HUGHES-DENTON, NICOLETTE P NAME NAME 4215 76TH STREET W. STREET ADDRESS STREET ADDRESS BRADENTON FL CITY-ST-ZIP CHY SI-ZIP ☐ Change Addition DILE Delete HUGHES, CARLA J 4215 76TH ST W STREET ADDRESS STREET ADDRESS BRADENTON FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete THE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CULY - ST - ZUP ☐ Change Addition TITLE Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-ZIP CHLY-ST-ZIP 12. 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 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.

FILED