

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 08, 2004
Secretary of State**

DOCUMENT# 751571

Entity Name: FRIENDS OF THE SAENGER, INC.

Current Principal Place of Business:

P.O. BOX 13666
PENSACOLA, FL 32591 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 13666
PENSACOLA, FL 32591 US

New Mailing Address:

FEI Number: 59-2015462 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, DOUG
118 S. PALAFOX STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEEKS, SHERRI
Address: 5100 N. 9TH AVE D-425
City-St-Zip: PENSACOLA, FL 32504

Title: TD () Delete
Name: GROSS, MRS. JOHN,
Address: 2706 BLACKSHEAR
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: QUINA, CARTER
Address: 400 W. ROMANA ST.
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEEKS, SHERRI
Address: 3039 KEATS DR
City-St-Zip: PENSACOLA, FL 32503

Title: TD (X) Change () Addition
Name: GROSS, PATRICIA S
Address: 2706 BLACKSHEAR AVE
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Change () Addition
Name: DOLORES DE LA RUA HA, YES
Address: 3131 LEESBURG SQUARE
City-St-Zip: PENSACOLA, FL 32504

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PATRICIA S. GROSS

TREA

02/08/2004

Electronic Signature of Signing Officer or Director

_____ Date