2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 763694

Entity Name: FRIENDS OF FLORIDA FOLK INCORPORATED

Current Principal Place of Business:

1625 VEREDA VERDE
SARASOTA, FL 342322164

New Principal Place of Business:

Current Mailing Address:

1625 VEREDA VERDE
SARASOTA, FL 342322164

New Mailing Address:

FEI Number: 65-0055900 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SNYDER, KEITH
337 E HILLCREST ST.
ALTAMONTE SPRINGS, FL 32701 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:	PURCELL, DOUGLAS	
Address:	2045 E. BAY DR APT703	
City-St-Zip:	LARGO, FL 33771	
Title:	VP	( ) Delete
Name:	CRUMMER, ART	
Address:	5623 SW 13TH ST	
City-St-Zip:	GAINESVILLE, FL 32608	
Title:	TD	( ) Delete
Name:	SNYDER, KEITH	
Address:	337 E HILLCREST ST	
City-St-Zip:	ALTAMONTE SPG, FL 32701	
Title:	SD	( ) Delete
Name:	HOLLOWAY, GLORIA	
Address:	4714 W FAIRVIEW HTS #10	
City-St-Zip:	TAMPA, FL 33616	
Title:	D	( ) Delete
Name:	LEWIS, MARGARET	
Address:	4411 BEE RIDGE RD PMB 281	
City-St-Zip:	SARASOTA, FL 34232	
Title:	D	( ) Delete
Name:	HEWITT, JEAN	
Address:	1625 VEREDA VERDE	
City-St-Zip:	SARASOTA, FL 34232	

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 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: KEITH M. SNYDER TD 04/22/2009

Electronic Signature of Signing Officer or Director — Date