

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10356

FILED  
Mar 15, 2011  
Secretary of State

Entity Name: THE FRIARS

**Current Principal Place of Business:**

4727 PRINCESS ANNE LANE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

4623 FRENCH STREET  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

4727 PRINCESS ANNE LANE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

4623 FRENCH STREET  
JACKSONVILLE, FL 32205

FEI Number: 59-2438171

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAMPTON, WADE M  
4348 SOUTHPOINT BLVD.  
SUITE 101  
JACKSONVILLE, FL 32216 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: VD  
Name: MARCHMAN, JORDAN  
Address: 4206 GENOA AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: PD  
Name: IRWIN, LOU  
Address: 4623 FRENCH STREET  
City-St-Zip: JACKSONVILLE, FL 32205

Title: TD  
Name: COURTNEY, NICHOLAS  
Address: 1908 WOODMERE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: SD  
Name: DENNING, JUSTIN  
Address: 4615 BIRKENHEAD ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: WADE M HAMPTON

RA

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date