2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K12898

FILED Sep 12, 2002 Secretary of State

Entity Name: THE FRIENDLY MOUNTAIN CLUB, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
80 SW 8TH #2203 MIAMI, FL					
Current Mailing Address:			New Maili	New Mailing Address:	
P O BOX 18 BLOWING	88 ROCK, NC 2	8605			
FEI Number:	65-0026240	FEI Number Applied For()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
80 SW 8TH STE 2203	ON, EDWARE I ST 331303004 U				
The above in the State		submits this statement for the pur	pose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
	Electron	ic Signature of Registered Agent	t	Date	
•	-	satisfy its Intangible Tax filing requirg Trust Fund Contribution ().	ement and elects to d	lo so (X).	
	AND DIREC	• • • • • • • • • • • • • • • • • • • •	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () CLAUGHTON, E 80 SW 8TH ST MIAMI, FL	· · · · · · · · · · · · · · · · · · ·	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition CLAUGHTON, EDWARD N 80 SW 8TH ST #2203 MIAMI, FL	
Title: Name: Address: City-St-Zip:	DS () CLAUGHTON, L 80 SW 8TH ST MIAMI, FL		Title: Name: Address: City-St-Zip:	DS (X) Change () Addition CLAUGHTON, LOIS H 80 SW 8TH ST #2203 MIAMI, FL	
Title: Name: Address: City-St-Zip:	DVS () SCHMIDT, SUZ 80 SW 8TH ST MIAMI, FL	•	Title: Name: Address: City-St-Zip:	DVS (X) Change () Addition SCHMIDT, SUZANNE C 80 SW 8TH ST #2203 MIAMI, FL	
Title: Name: Address: City-St-Zip:	DV (X) SCHMIDT, ROE 80 SW 8TH ST MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DTS (X) CARTER, WILL 80 SW 8TH ST MIAMI, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD N. CLAUGHTON DP 09/12/2002