


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # K49509	
1. Entity Name FRIEND'S JEWELERS, INC.	

Principal Place of Business % JOHN C. FRIEND 1387 MAIN STREET SARASOTA, FL 34236	Mailing Address % JOHN C. FRIEND 1387 MAIN STREET SARASOTA, FL 34236
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DO NOT WRITE IN THIS SPACE



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2075255	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FRIEND, JOHN C.
1387 MAIN STREET
SARASOTA, FL**

**DO NOT WRITE
IN THIS SPACE**

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 John C. Friend DATE 4-29-2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D	FRIEND, JOHN C.
NAME	2408 SOUTH BRINK AVE.
STREET ADDRESS	SARASOTA, FL
CITY-ST-ZIP	
TITLE VP	FRIEND, JOHN T.
NAME	9210 66TH AVE. EAST
STREET ADDRESS	BRADENTON, FL
CITY-ST-ZIP	
TITLE S	BLANKENSHIP, KATHY J.
NAME	5366 KNOLLWOOD PLACE
STREET ADDRESS	SARASOTA, FL
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/05/05-80100-014 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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.

SIGNATURE: John C. Friend DATE 4-29-2005 DAYTIME PHONE # 941-955-4956
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR