


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2004 8:00 am**  
**Secretary of State**

03-02-2004 90049 019 \*\*\*\*75.00

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| <b>DOCUMENT # N00000007185</b><br>1. Entity Name<br><b>FRIENDLY RESOURCE INFORMATION SERVICE OF THE<br/>COMMUNITY AND YOUTH INC.</b> |  |
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|--|---|
| Principal Place of Business<br><b>1831 NW 170TH STREET<br/>MIAMI, FL 33056</b> | Mailing Address<br><b>P.O. BOX 541116<br/>MIAMI, FL 33054</b> |
|--|---|



02032004 No Chg-NP CR2E037 (10/03)

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| 4. FEI Number<br><b>65-1058732</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional<br/>Fee Required</b> |  |

**6. Name and Address of Current Registered Agent**

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| <b>COOK, JOSEPH L<br/>1831 NW 170TH STREET<br/>MIAMI, FL 33056</b> |
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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 *Joseph L. Cook* *Joseph L. Cook* *2-13-2004*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

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

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VPD<br>COOK, JOSEPH L<br>1831 NW 170 STREET<br>MIAMI, FL 33056     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>ALIC-BATSON, ROSLYN<br>6645 EVERGREEN DR<br>MIRAMAR, FL 33023 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TD<br>PRITCHETT, SHARON<br>1401 NW 202 STREET<br>MIAMI, FL 33169   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>RAO, RACHEL V<br>20630 N MIAMI AVE<br>MIAMI, FL 33169        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>WILLIAMS, DAVID JR<br>17640 NW 18TH AVE<br>MIAMI, FL 33056    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph L. Cook* *Joseph L. Cook* *2-13-2004*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #