## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N00000007381

Entity Name: BOXER FRIENDS, INC.

TI FILED
Jun 20, 2005
Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1218 SW 21 CT.

FT. LAUDERDALE, FL 33315

Current Mailing Address: New Mailing Address:

PO BOX 460804

FT LAUDERDALE, FL 333460804

FEI Number: 65-1052908 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KOTZIERS, LINDA 1218 SW 21 CT

FORT LAUDERDALE, FL 33315 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LOMILLO, LAURIE

PLANTATION, FL 33322

1772 NW 91 AVE.

(X) Change ( ) Addition

 Title:
 DP
 ( ) Delete
 Title:

 Name:
 BRUSCINO, DOLORES
 Name:

 Address:
 432 BISCAYNE LANE
 Address:

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:

Title: DT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KOTZIERS, LINDA
 Name:

 Address:
 1218 SW 21 CT
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33315
 City-St-Zip:

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 REDLHAMMER, CATHLEEN
 Name:
 LOMILLO, SAMANTHA

 Address:
 6508 SOUTHWEST 20 COURT
 Address:
 11379 NW 34 PL.

 City-St-Zip:
 PLANTATION, FL 33317
 City-St-Zip:
 SUNRISE, FL 33323

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

SIGNATURE: LINDA KOTZIERS DT 06/20/2005