2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007381

Entity Name: BOXER FRIENDS, INC.

Apr 17, 2009 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:

Date

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

() Change () Addition

OFFICERS AND DIRECTORS:

(X) Change () Addition

KOTZIERS, LINDA

16569 NW 15TH ST

BRAYMER, EILEEN

4714 NW 7TH PL

PEMBROKE PINES, FL 33028

DEERFIELD BEACH, FL 33442

DP

DS

HUNT, FRAN

BRUSCINO, DOLORES Name: Name: 432 BISCAYNE LN Address: Address:

1218 SW 21 CT City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: FT LAUDERDALE, FL 33315

Title: DT () Delete Name: KOTZIERS, LINDA

Address: 1218 SW 21 CT City-St-Zip: FORT LAUDERDALE, FL 33315

Title: DP () Delete

() Delete

HUNT, FRAN Name: Address: 16569 NW 15 ST

City-St-Zip: PEMBROKE PINES, FL 33028

Title: Name: BRAYMER, EILEEN

Address: 4714 NW 7 PL City-St-Zip: DEERFIELD BEACH, FL 33442

DS (X) Delete Title:

> Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 04/17/2009