


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N0000008057**  
 1. Entity Name  
**FRIENDS HELPING FRIENDS AT THE GLEN, INC.**



Principal Place of Business  
**1860 PALO DURO BLVD  
 NORTH FORT MYERS, FL 33917**

Mailing Address  
**1870 EMSAREADERO WAY  
 NORTH FORT MYERS, FL 33917**

**DO NOT WRITE IN THIS SPACE**



02132008 No Chg-NP CR2E037 (4/06)

|                                    |                               |
|------------------------------------|-------------------------------|
| 4. FEI Number<br><b>65-1057046</b> | Applied For<br>Not Applicable |
|------------------------------------|-------------------------------|

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

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

**HOPKINS, BETTY  
 1870 EMBARCADERO WY  
 NORTH FORT MYERS, FL 33917**

**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 *Betty Hopkins* (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
 Due by May 1, 2008**

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

U00000944777  
 05/29/08-80113-013 61.25

**10. OFFICERS AND DIRECTORS**

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>HOPKINS, BETTY<br>1870 EMBARCADERO WAY<br>NORTH FORT MYERS, FL 33917 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>SCHMIDT, DIANE<br>3576 ODYSSEA CT<br>NORTH FORT MYERS, FL 33917     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>AMSDEN, SHEILA<br>2320 PALO DURO BLVD<br>NORTH FORT MYERS, FL 33917  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>MARUIS, SANDRA<br>1751 PALO DURO BLVE<br>NORTH FORT MYERS, FL 33917  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | 1VC<br>SHERDIAN, MARY<br>2400 PALO DURO BLVD<br>FORT MYERS, FL 33917      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VC<br>FARLEY, CINDY<br>1921 EMBARCADERO WAY<br>NORTH FORT MYERS, FL 33917 |

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Betty Hopkins* 4/29/08 239-567-3077  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #