2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2012
Secretary of State

DOCUMENT# N00000008093

Entity Name: THE FRIENDSHIP ASSOCIATION, INC.

Current Principal Place of Business:

7265 A1A SOUTH
D1
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

7265 A1A SOUTH
D1
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 59-3675072 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAGLIUCA, SALLY
7265 A1A SOUTH
D-1
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

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:

Title: PD
Name: DIXON, RONALD
Address: 514 11TH STREET
City-St-Zip: ST. AUGUSTINE (NORTH BEACH), FL 32086

Title: SD
Name: PAGLIUCA, SALLY
Address: 7265 A1A SOUTH, APT. D-1
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D
Name: WEEKS, LEN
Address: 62 HYPOLITA ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VD
Name: JONES, ALBERTO
Address: 1 BLACKFOOT CT.
City-St-Zip: PALM COAST, FL 32137

Title: TD
Name: MCINTIRE, JO D.
Address: 7265 A1A SOUTH, APT. D-1
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: VD
Name: PAIDAS, GEORGE
Address: PO BOX 840264
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby 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 all other like empowered.

SIGNATURE: SALLY PAGLIUCA SECR 01/22/2012

Electronic Signature of Signing Officer or Director — Date