

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002689

**FILED**  
**Jan 15, 2011**  
**Secretary of State**

**Entity Name:** FRIENDS OF THE MARINE SCIENCE CENTER, INC.

**Current Principal Place of Business:**

100 LIGHTHOUSE DRIVE  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

64 BAY HARBOUR DRIVE  
PONCE INLET, FL 32127 US

**New Mailing Address:**

**FEI Number:** 59-3718113

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAHAM, THERESIA C  
64 BAY HARBOUR DRIVE  
PONCE INLET, FL 32127 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:** VP  
**Name:** CAMERON, MARLENE  
**Address:** 4720 S. PENINSULA DR.  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** P  
**Name:** ECKERT, LAURA  
**Address:** 66 BAY HARBOUR CT  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** T  
**Name:** HARDESTY, KATHY  
**Address:** 795 TORCHWOOD DR  
**City-St-Zip:** DELAND, FL 32724

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:** KATHY M HARDESTY

TRES

01/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date