2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004077

FILED Jun 16, 2010 Secretary of State

Entity Name: FRANCIS I AMENITIES CORPORATION, INC.

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

29 MIMI ST 29 MIMI S

SEBRING, FL 33875 SEBRING, FL 33870

Current Mailing Address: New Mailing Address:

29 MIMI ST 29 MIMI ST

SEBRING, FL 33875 SEBRING, FL 33870

FEI Number: 59-3732176 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:

KORP, WILLIAM KORP, WILLIAM

240 S. PINEAPPLE AVE., 10TH FLOOR 1 SARASOTA TOWER, 2 NORTH TAMIAMI TRAIL

SARASOTA, FL 34236 US SUITE 50 SARASOTA, FL 34236 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: 06/16/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: KELLER, PATRICIA
Address: 551 ADDISON STREET
City-St-Zip: SEBRING, FL 33870

Title: V

Name: ELIFRITZ, WANDA SUE Address: 11 CHEROKEE STREET City-St-Zip: SEBRING, FL 33870

Title: T

Name: ROBERTS, SUSAN Address: 602 SEBRING DRIVE City-St-Zip: SEBRING, FL 33870

Title: 9

Name: CRAWLEY, MICKEY
Address: 18 CHEROKEE STREET
City-St-Zip: SEBRING, FL 33870

Title:

Name: SMITH, QUENTIN
Address: 473 PAULINE STREET
City-St-Zip: SEBRING, FL 33870

Title:

Name: JULIETTE, WHITEHEAD Address: 509 VON MAXCY ROAD City-St-Zip: SEBRING, FL 33870

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: PATRICIA KELLER P 06/16/2010