

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004495

FILED  
Mar 21, 2009  
Secretary of State

**Entity Name:** FRIENDSHIP AND PEACE SOCIETY, INC.

**Current Principal Place of Business:**

5214 WINCHESTER ST  
SARASOTA, FL 34342

**New Principal Place of Business:**

**Current Mailing Address:**

3806 COUNTRY PLACE LANE  
SARASOTA, FL 34233

**New Mailing Address:**

**FEI Number:** 65-1128197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSSER, ELLEN  
5214 WINCHESTER ST.  
SARASOTA, FL 34342 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: T ( ) Delete  
Name: OCKULY, MARTA  
Address: 4334 AUGUSTINE AVE  
City-St-Zip: SARASOTA, FL 34231

Title: S ( ) Delete  
Name: CHRISTIDES, MICHELLE  
Address: 5214 WINCHESTER ST.  
City-St-Zip: SARASOTA, FL 34342

Title: VD ( ) Delete  
Name: DREYFUS, DAN  
Address: 3412 CLARK ROAD  
City-St-Zip: SARASOTA, FL 34231

Title: VPD ( ) Delete  
Name: HICKMAN, BRENDA  
Address: 2110 LUSITANIA DR  
City-St-Zip: SARASOTA, FL 34231

Title: PD ( ) Delete  
Name: ROSSER, ELLEN  
Address: 5214 WINCHESTER ST.  
City-St-Zip: SARASOTA, FL 34342

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: LISA, SCALABRINI  
Address: P.O. BOX 933  
City-St-Zip: POINT ARENA, CA 95468

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: ELLEN ROSSER

PD

03/21/2009

Electronic Signature of Signing Officer or Director

Date