## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002840

Entity Name: FRIENDS OF SANDI TELLEX, INC.

FILED Sep 07, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6270 107TH PLACE SOUTH BOYNTON BEACH, FL 33437 **Current Mailing Address: New Mailing Address:** 6270 107TH PLACE SOUTH BOYNTON BEACH, FL 33437 FEI Number: 72-1523678 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INGMAN, SHEILA OSGOOD, SHEILA 6270 107TH PLACE SOUTH 6270 107TH PLACE SOUTH US US BOYNTON BEACH, FL 33437 BOYNTON BEACH, FL 33437 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: SHEILA OSGOOD 09/07/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STEVENS, HENRY W Name: Name: 8788 PIONEER RD. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: Title: () Delete Title: () Change () Addition STEVENS, MAUREEN Name: Name: Address: 8788 PIONEER RD. Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition QUARTULLO, JUDITH A Name: DERRYBERRY, BARBARA Name: Address: 1211 OLYMPIC CIRCLE Address: 1744 N. LAKESIDE DR. City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: LAKE WORTH, FL 33460 (X) Change ( ) Addition Title: () Delete Title: Name: INGMAN, SHEILA Name: OSGOOD, SHEILA 6270 107TH PLACE SOUTH Address: Address: 6270 107TH PLACE SOUTH City-St-Zip: BOYNTON BEACH, FL 33434 City-St-Zip: BOYNTON BEACH, FL 33434 Title: () Delete Title: () Change () Addition SIDAWAY, PEGGY Name: Name: 437 PINE GLEN Address: Address: LAKE WORTH, FL 33463 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition BRAMUCHI, PHYLLIS Name: Name: Address: 451 PINE VILLA DR. Address: ATLANTIS, FL 33462 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHEILA OSGOOD TREA 09/07/2005