## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003767

FILED Jaņ 1<u>0, 2</u>006 Secretary of State

Entity Name: FRIENDS OF THE GARDEN TOMB, USA, INC.

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

7380 SAND LAKE RD, STE 100 ORLANDO, FL 32819

**Current Mailing Address: New Mailing Address:** 

7380 SAND LAKE RD, STE 100 ORLANDO, FL 32819

FEI Number: 03-0446083 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:

STRACK, JAY DR 7380 SAND LAKE RD, STE 100 ORLANDO, FL 32819

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:

Name:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition STRACK, JAY DR. STRACK, JAY Name:

7380 SAND LAKE RD, STE 100 Address: 7380 SAND LAKE RD, STE 100 Address:

City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: Title: MR (X) Change ( ) Addition ( ) Delete Name: THOMAS, STAN Name: THOMAS, STAN

Address: 300 VILLAGE GREEN CIR. STE 200 Address: 45 ANSLEY DR. City-St-Zip: SMYRNA, GA 30080 City-St-Zip: NEWNAN, GA 30263

Title: () Delete Title: (X) Change ( ) Addition

THOMAS, CLAUDE DR. THOMAS, CLAUDE Name: Name: 3100 N. INDUSTRIAL 6002 HIGHLAND HILLS LN Address: Address: City-St-Zip: **EULESS. TX 76039** City-St-Zip: COLLEYVILLE, TX 76034

Title: ( ) Delete Title: DR (X) Change ( ) Addition

Name: FERGUSON, DAVID Name: FERGUSON, DAVID Address: 11615 ANGUS RD SUITE 203 Address: 11615 ANGUS RD SUITE 203

City-St-Zip: AUSTIN, TX 78759 City-St-Zip: AUSTIN, TX 78759

I hereby certify that the information supplied with this filing does not qualify for the 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: JAY STRACK DR 01/10/2006