2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N02000005668

Entity Name: FRIENDS OF THE COMMUNITY CENTERS, INC.

Current Principal Place of Business:

2804 MARC KNIGHTON CT.
STE B ROOM 150
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

2804 MARC KNIGHTON CT.
STE B ROOM 150
LECANTO, FL 34461

New Mailing Address:

FEI Number: 03-0436639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLIVERI, NANCY R
2778 W. BRAMWOOD DR.
PINE RIDGE, FL 34465 US

Name and Address of New Registered Agent:

OLIVERI, NANCY R
2778 W. BEAMWOOD DR.
PINE RIDGE, FL 34465 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: _____ 04/06/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HARMON, BARBARA J
Address: 1178 N. GREENTREE TERR.
City-St-Zip: LECANTO, FL 34461

Title: PD ( ) Delete
Name: OLIVERI, NANCY R
Address: 2778 W. BEAMWOOD DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: S ( ) Delete
Name: D'AMICO, VIRGINIA
Address: 3485 N. TAMARISK AVE
City-St-Zip: BEVERLY HILLS, FL 34465

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:

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: BARBARA J HARMON PD 04/06/2009
Electronic Signature of Signing Officer or Director — Date