2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jun 09, 2004 8:00 am Secretary of State **DOCUMENT # N02000006071** 06-09-2004 90002 050 ****61.25 1. Entity Name FRIENDS ALONG THE ROAD, INC. Principal Place of Business Mailing Address 16811 SANIBEL SUNSET CT. 16811 SANIBEL SUNSET CT. #302 FORT MYERS, FL 33908 FORT MYERS, FL 33908 2. Principal Place of Business 4725 Barkley Circle #1 4725 Barkley Circle#1 Suite, Apt. #, etc 05142004 Chg-NP Suite, Apt. #, etc. CR2E037 (10/03) 4. FEI Number 13-4207135 City & State Applied For Not Applicable ountry \$8.75 Additional L'ee Certificate of Status Desired Lee 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PIERCE, DAVID D'JR. Street Address (P.O. Box Number is Not Acceptable) 16811 SANIBEL SUNSET CT. #302 4725 Barkley Circle #1 FORT MYERS, FL 33908 Zip Code 33907 8. The above named entity submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Florida. I am familiar with, and accept avid D. Pierce Jr. 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by September 8, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Defete TITLE Change ☐ Addition TITLE PIERCÉ, DAVID D JR. MARKE NAME 4725 Barkley Circle #1 STREET ADDRESS 16811 SANIBEL SUNSET CT. #302 STREET ADDRESS FORT MYERS, FL 33908 Fort Myers, FL 3390 CITY-ST-ZIP CITY-ST-ZIP VD ☐ Change ☐ Delete TITLE □ Addition $nn \epsilon$ MCDERMOTT, KAREN NAME NAME 237 W. 3RD STREET ADDRESS STREET ADDRESS **DENVER, CO 80223** CITY-ST-7IP CITY-ST-7IP Secretary/Treasurer Delete TITLE TITLE PIERCÉ, JUDITH A NAME NAME STREET ADDRESS 16811 SANIBEL SUNSET CT. #302 STREET ADDRESS FORT MYERS, FL 33908 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition GRAHAM, JC NAME 12424 SW 154TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VASHÓN, WA 98070 CBY-ST-ZIE TITLE ☐ Delete ☐ Change ☐ Addition FISHER, SHAUNA NAME MARKE 121 FOREST DRIVE STREET ADDRESS STREET ADDRESS FRISCO, CO 80443 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if

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