2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007
Secretary of State

DOCUMENT# N03000003522

Entity Name: FRIENDS OF HOWARD PARK, INC.

Current Principal Place of Business:

1700 SUNSET DRIVE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

1026 ANCLOTE DRIVE
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 02-0690675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHOLAS, LEE
757 BAYSHORE DRIVE
TARPON SPRINGS, FL 34689 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: P ( ) Delete
Name: SNYDER, BRUCE L JR.
Address: 1026 ANCLOTE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VP ( ) Delete
Name: NICHOLAS, ROSEMARIE
Address: 757 BAYSHORE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: S ( ) Delete
Name: RODRIGUEZ, NIKKI
Address: 1831 CARDAMON DR
City-St-Zip: TRINITY, FL 34655

Title: T ( ) Delete
Name: WARNKE, RICHARD
Address: 2006 HARBOR WATCH CIR
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D ( ) Delete
Name: RODRIGUEZ, JESUS
Address: 1831 CARDAMON DR
City-St-Zip: TRINITY, FL 34655

Title: D ( ) Delete
Name: MCCARREN, GENE
Address: 3555 WINDOR DR
City-St-Zip: HOLIDAY, FL 34691

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: ( ) 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: BRUCE L. SNYDER, JR. P 04/25/2007

Electronic Signature of Signing Officer or Director — Date