## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010777

FILED Mar 30, 2007 Secretary of State

Entity Name: FRIENDS OF TEMPLE TERRACE PARKS AND RECREATION DEPARTMENT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6610 WHITEWAY DRIVE TEMPLE TERRACE, FL 33617 **Current Mailing Address: New Mailing Address:** 6610 WHITEWAY DRIVE TEMPLE TERRACE, FL 33617 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENWAY, ROBERT E M.D. 1225 N RÍVERHILLS DR TEMPLE TERRACE, FL 33617 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LATINA, ALBERT A Name: Name: 7002 DOREEN STREET Address: Address: City-St-Zip: TAMPA, FL 33617 City-St-Zip: Title: VD () Delete Title: (X) Change ( ) Addition Name: BENWAY, ROBERT E \ Name: CLARK, AMANDA \ Address: 1225 N RIVERHILLS DR Address: 311 FOREST PARK AVENUE City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617 Title: () Delete Title: () Change () Addition RIMBEY, GRANT Name: Name: 411 ISLAND ROAD Address: Address: City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: Title: ( ) Delete Title: TD ( ) Change (X) Addition Name: Name: ERNEST, BRENDA 7814 LAPWOOD AVENUE Address: Address: City-St-Zip: City-St-Zip: TEMPLE TERRACE, FL 33617

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: ROBERT E. BENWAY RA 03/30/2007