

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 15, 2008**  
**Secretary of State**

DOCUMENT# N05000005913

Entity Name: FRIENDS OF NEWMAN, INC.

**Current Principal Place of Business:**370 S.W. 3RD STREET  
BOCA RATON, FL 33432**New Principal Place of Business:****Current Mailing Address:**4505 SOUTH OCEAN BLVD  
106  
HIGHLAND BEACH, FL 334874227**New Mailing Address:**

FEI Number: 20-2990174

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**FITGERALD, PATRICK J ESQ  
110 MERRICK WAY SUITE3-B  
CORAL GABLES, FL 33134 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: GAUCHER, PAUL L  
Address: 1472 SW 13TH DRIVE  
City-St-Zip: BOCA RATON, FL 33486Title: D ( ) Delete  
Name: MCCORRY, TERENCE  
Address: 9995 N. MILITARY TRAIL P.O. BOX 109650  
City-St-Zip: PALM BEACH GARDENS, FL 33410Title: V ( ) Delete  
Name: FLUEHR, CHRISTOPHER J  
Address: 280 FERN DRIVE  
City-St-Zip: BOCA RATON, FL 33486Title: S ( ) Delete  
Name: CUTAIA, SUSAN D  
Address: 2095 PARK COURT  
City-St-Zip: BOCA RATON, FL 33486Title: T ( ) Delete  
Name: SIEGEL, RICHARD P  
Address: 4505 SOUTH OCEAN BLVD. UNIT 106  
City-St-Zip: HIGHLAND BEACH, FL 33487**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: FLUEHR, CHRISTOPHER J  
Address: 280 FERN DRIVE  
City-St-Zip: BOCA RATON, FL 33432Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: S (X) Change ( ) Addition  
Name: ROBBE, ROGER M  
Address: 6881 VILLAS DRIVE  
City-St-Zip: BOCA RATON, FL 33433Title: V (X) Change ( ) Addition  
Name: CUTAIA, SUSAN D  
Address: 2095 PARK COURT  
City-St-Zip: BOCA RATON, FL 33486Title: ( ) 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: CHRISTOPHER J. FLUEHR

P

04/15/2008

Electronic Signature of Signing Officer or Director

Date