

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003472

FILED
Jul 29, 2008
Secretary of State

Entity Name: FRIENDS OF FLORIDA ASSISTANT STATE ATTORNEYS, INC.

Current Principal Place of Business:

11705 NW 2 ST
PLANTATION, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 550541
FORT LAUDERDALE, FL 33355 US

New Mailing Address:

FEI Number: 42-1699884 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARIAS, JUAN C
11705 NW 2 ST
PLANTATION, FL 33325 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: ARIAS, JUAN C
Address: 11705 NW 2 ST
City-St-Zip: PLANTATION, FL 33325 US

Title: D () Delete
Name: ROSSMAN, GREGG
Address: 201 SE 6TH ST, SUITE 660
City-St-Zip: FT LAUDERDALE, FL 33301 US

Title: T () Delete
Name: PASCAL, ALAN
Address: 4581 W MCNAB RD, UNIT 35
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: S () Delete
Name: VIAMONTES, FRANCIS
Address: 1591 SW 54TH AVE
City-St-Zip: PLANTATION, FL 33301 US

Title: D () Delete
Name: MILLER, ELYSE
Address: 3441 OAK DR
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: D () Delete
Name: SINGGHAN, ANURAAG
Address: 1323 SE 4TH AVE
City-St-Zip: FT LAUDERDALE, FL 33316 US

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
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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: JUAN C. ARIAS

P

07/29/2008

Electronic Signature of Signing Officer or Director

Date