

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012420

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** FRIENDS OF ADULT DAY SERVICES CORP.

**Current Principal Place of Business:**

1560 ROBERTS DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

1560 ROBERTS DRIVE  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

PO BOX 97  
PONTE VEDRA BEACH, FL 32004

**FEI Number:** 38-3747966

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEIL, CAROL J  
14548 CRYSTAL VIEW LANE  
JACKSONVILLE BEACH, FL 32250 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  
Name: NEIL, CAROL J  
Address: 14548 CRYSTAL VIEW LANE  
City-St-Zip: JACKSONVILLE, FL 32250

Title: V  
Name: CATALLO, SANDRA  
Address: 111 DAHALA CT  
City-St-Zip: PONTE VEDRA, FL 32082

Title: D  
Name: LANGLEY, JOYCE  
Address: 1767 TALL TREE DRIVE EAST  
City-St-Zip: JACKSONVILLE, FL 32246

Title: S  
Name: GABRIELLE, TONY  
Address: 360 SOUTH NINE DRIVE  
City-St-Zip: PONTE VEDRA, FL 32082

Title: D  
Name: HARRIS, RENEE  
Address: 2112 NEWBERRY RD  
City-St-Zip: JACKSONVILLE BEACH, FL 32218

Title: T  
Name: GOODLOE, GEORGE  
Address: 1611 OCEAN BLVD  
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby 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 all other like empowered.

**SIGNATURE:** TONY GABRIELLE

S

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date