2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000442

FILED Apr 25, 2009 Secretary of State

DOCO	AITIA I M. IAO	000000		Secretary or State	
Entity Na	ame: FRIENDS	S OF SANTA ROSA COUNTY	, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DERAL STREE E, FL 32566	Т			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	DERAL ST. E, FL 32566		6579 FEDERAL STRE NAVARRE, FL 32566	ET	
FEI Numbei	r: 55-0881502	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
6579 FED	FERREE, SUE DERAL STREE E, FL 32566				
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	JRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICER	RS AND DIREC	CTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SISKIN, ENID 4172 MADURA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KOLB, CAROL 7181 WELLS	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PETERS-FERI 6579 FEDERA		Title: Name: Address:	() Change () Addition	
	NAVARRE, FL	32566	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: SUE PETERS-FERREE DIR 04/25/2009