

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008717

FILED
Jan 31, 2009
Secretary of State

Entity Name: FRIENDS OF LAKE TALQUIN, INCORPORATED

Current Principal Place of Business:

160 DUSTY HUNTER LANE
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2247
QUINCY, FL 32353

New Mailing Address:

FEI Number: 26-1011203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, BELINDA D
160 DUSTY HUNTER LANE
QUINCY, FL 32351 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: SNYDER, BELINDA D
Address: 160 DUSTY HUNTER LANE
City-St-Zip: QUINCY, FL 32351 US

Title: VP () Delete
Name: HABER, BARRY
Address: 900 TALQUIN AVENUE
City-St-Zip: QUINCY, FL 32351 US

Title: S () Delete
Name: CURTIS, PATRICIA
Address: 761 BEAR CREEK ROAD
City-St-Zip: QUINCY, FL 32351 US

Title: T () Delete
Name: IVEY, JOANNE
Address: 388 TALQUIN AVENUE
City-St-Zip: QUINCY, FL 32351 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
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: JOANNE M. IVEY

TREA

01/31/2009

Electronic Signature of Signing Officer or Director

Date