

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000754

FILED
Jan 29, 2009
Secretary of State

Entity Name: FRIENDS OF CLEAN CITY, INC.

Current Principal Place of Business:

7525 NORTH BOULEVARD
TAMPA, FL 33604

New Principal Place of Business:

1414 N MARION STREET
TAMPA, FL 33602

Current Mailing Address:

P.O. BOX 21631
TAMPA, FL 33622 16

New Mailing Address:

P.O. BOX 172035
TAMPA, FL 33672

FEI Number: 26-1727917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODRIGUEZ, JAMES
7525 NORTH BOULEVARD
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

RODRIGUEZ, JAMES
1414 N MARION STREET
TAMPA, FL 33602 US

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:

01/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: SEXTON, SUE ELLEN
Address: 3913 W. MCKAY AVENUE
City-St-Zip: TAMPA, FL 33609

Title: VPC () Delete
Name: BOOTH, DARREN
Address: 14743 CANOPY DRIVE
City-St-Zip: TAMPA, FL 33626

Title: TRUS () Delete
Name: CHOICE, CAROL
Address: 8575 MOTERAIL #738
City-St-Zip: TAMPA, FL 33637

Title: ST () Delete
Name: COOPERIDER, HOWARD
Address: 4221 W. SPRUCE STREET
City-St-Zip: TAMPA, FL 33607

Title: TRUS () Delete
Name: HELLMAN, STEVEN
Address: 18863 MAISONS DRIVE
City-St-Zip: LUTZ, FL 33558

Title: TRUS () Delete
Name: RAPELLA, STUART
Address: 2716 SHADECREST ROAD
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPC (X) Change () Addition
Name: DENSON, DAVID
Address: 1910 E 22ND AVENUE
City-St-Zip: TAMPA, FL 33605

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: SUE ELLEN SEXTON

CHRM

01/29/2009

Electronic Signature of Signing Officer or Director

Date