2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N14528

Entity Name: FOUNTAINVIEW ESTATES FRIENDSHIP COUNCIL, INC.

Current Principal Place of Business:

FOUNTAINVIEW ESTATE
8800 SHELDON RD
TAMPA, FL 33635

New Principal Place of Business:

Current Mailing Address:

FOUNTAINVIEW ESTATE
8800 SHELDON RD
TAMPA, FL 33635 US

New Mailing Address:

FEI Number: 06-0197900 **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:

MARTINEZ, ANTONIO
9133 MCMILLAN LANE
TAMPA, FL 33635 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: T ( ) Delete
Name: LAFOUNTAIN, ALICE
Address: 9117 GROSSE PTE BLVD
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete
Name: JONES, GRETCHEN
Address: 9113 BLAIR MOOR RD
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete
Name: MYDLOWSKI, LORETTA
Address: 9124 BLAIRMOOR RD
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete
Name: MARTINEZ, MELODY
Address: 9133 MCMILLAN LANE
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete
Name: GAY, ELIZABETH A
Address: 9016 NAUTILUS DR
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete
Name: VARNUM, SUE
Address: 8829 WELLINGTON DRIVE
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: KNUDSEN, BARBARA
Address: 8801 MORAN
City-St-Zip: TAMPA, FL 33635

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: ANTONIO MARTINEZ RA 05/04/2009
Electronic Signature of Signing Officer or Director Date