2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19152

FILED Aug 16, 2011 Secretary of State

Entity Name: ORMOND BEACH FRIENDS OF RECREATION, INC.

Current Principal Place of Business: New Principal Place of Business:

675 RIVERSIDE DRIVE 24 TOMOKA MEADOWS BLVD. ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

675 RIVERSIDE DRIVE
ORMOND BEACH, FL 32176

24 TOMOKA MEADOWS BLVD.
ORMOND BEACH, FL 32174

FEI Number: 59-2497356 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HORAN, RUTH
675 RIVERSIDE DR
0RMOND BEACH, FL 321764879 US

SCOTTI, JOHN
24 TOMOKA MEADOWS BLVD
ORMOND BEACH, FL 32174 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: JOHN SCOTTI 08/16/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: VAN RHEE, JAY

Address: 843 KNOLLWOOD BLVD.
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VD

Name: SCOTTI, JOHN

Address: 24 TOMOKA MEADOWS BLVD. City-St-Zip: ORMOND BEACH, FL 32174

Title: SD

Name: GATES, JUSTIN

Address: 10 BROADCREEK CIRCLE City-St-Zip: ORMOND BEACH, FL 32174

Title: TD

Name: TOLLAND, LORI
Address: 5 BROADWATER RD.
City-St-Zip: ORMOND BCH, FL 32174

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: JOHN SCOTTI VD 08/16/2011