2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22407

FILED Apr 09, 2011 Secretary of State

Entity Name: FRIENDS OF THE DISABLED, INC.

Current Principal Place of Business:

New Principal Place of Business:

340 MIRACLE STRIP PKWY., UNIT 6 MARY ESTHER, FL 325691834 US

Current Mailing Address: New Mailing Address:

302 HOLMES BLVD., N.W. C/O PATRICK O'NEILL, PHD FORT WALTON BEACH, FL 325484102 US

FEI Number: 63-0852361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

VINCENT, PAUL C.

7535 SOUTHPOINTE PL.

PENSACOLA, FL 32514 US

O'NEILL, PHD, PATRICK W (CO-DIR 302 HOLMES BOULEVARD NW FORT WALTON BEACH, FL 325484102 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: PATRICK W. O'NEILL, PHD (CO-DIRECTOR) 04/09/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: [

Name: VINCENT, PAUL C

Address: 7535 SOUTHPOINTE PLACE City-St-Zip: PENSACOLA, FL 32514 US

Title: FD

Name: DOUGLASS R. C.
Address: 7535 SOUTHPOINTE PL.
City-St-Zip: PENSACOLA, FL 32514

Title:

Name: VINCENT, JEAN
Address: 1062 WOODSIDE DR
City-St-Zip: MOBILE, AL 36608

Title:

Name: O'NEILL, PHD, PATRICK W
Address: 302 HOLMES BOULEVARD NW
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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: PATRICK W. O'NEILL, PHD (CO-DIRECTOR)

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04/09/2011