

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23760

FILED
May 29, 2009
Secretary of State

Entity Name: FRIENDS BROADCASTING, INC.

Current Principal Place of Business:

C/O TOM CRAWFORD
2180 SE MORNINGSID BLVD.
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

C/O TOM CRAWFORD
2180 SE MORNINGSID BLVD.
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 65-0027942 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:

Name and Address of New Registered Agent:

CRAWFORD, TOM
2180 SE MORNINGSID BLVD.
PORT ST. LUCIE, FL 34952 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PHILLIPS, LEROY
Address: 5415 NORTHWEST CLARK AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: PD () Delete
Name: WILLIAMS, RAYMOND
Address: 849 SOUTHEAST DEGAN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAYMOND WILLIAMS

PD

05/29/2009

Electronic Signature of Signing Officer or Director

Date