2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N24731

1. Entity Name

NAME

STREET ADDRESS

CITY-ST-7IP

WECKER, SHIRLEY

WARM MINERAL SPRINGS, FL 34287

6834 AMOCO

FRIENDSHIP CLUB OF WARM MINERAL SPRINGS, INC.



FILED Mar 13, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

12125 WARM MINERAL SPRINGS DRIVE WARM MINERAL SPRINGS, FL 34287 PO BOX 7693 NORTH PORT, FL 34287



DO NOT WRITE IN THIS SPACE

02182008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0093860

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KANIZAJ, JOSEPH 234 SAN MARCO AVE. WARM MINERAL SPRINGS, FL 34287

DO NOT WRITE IN THIS SPACE

					·	
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title If applicable. (NOTE: Registered Agent signature require					DATE	
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financi Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNAPP, MARGARETE 5379 BARLOW TERR NORTH PORT, FL 34287				000000857341 03/31/08-80009-021 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZELENT, HENRY 842 OHIO CT ENGLEWOOD, FL 34223					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KNAPP, ERNST 5379 BARLOW TERRACE NORTH PORT, FL 34287			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROTH, ERIKA 12306 ALTA MIRA WARM MINERAL SPRINGS, FL 34287					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAROS, KARL 219 SAN JUAN DRIVE WARM MINERAL SPRINGS, FL 3428	7				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARETE KNAPP 3-10-08 941-423-9623