

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40736

Entity Name: UNITED FRIENDS, INC.

FILED
Jan 08, 2004
Secretary of State**Current Principal Place of Business:**1815 GREGORY ROAD
ORLANDO, FL 32825**New Principal Place of Business:****Current Mailing Address:**1815 GREGORY ROAD
ORLANDO, FL 32825**New Mailing Address:**

FEI Number: 59-3036742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:PHILLIPS, JOY
1815 GREGORY RD
ORLANDO, FL 32825**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: DP () Delete
Name: PHILLIPS, JOY,
Address: 1815 GREGORY ROAD
City-St-Zip: ORLANDO, FLTitle: ST () Delete
Name: PHILLIPS, JOY,
Address: 1815 GREGORY ROAD
City-St-Zip: ORLANDO, FLTitle: D () Delete
Name: PHILLIPS, CHARLOTTE
Address: 1975 GREGORY ROAD
City-St-Zip: ORLANDO, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**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 for the exemption stated in Section 119.07(3)(i), 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: JOY PHILLIPS

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date