2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
05-16-2001 90022 040 ****61.25

DOCUMENT # N45244

1. Entity Name

FRIENDS OF OSCEOLA CHILDREN, INC.

550310

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
717 WEST BRYAN STREET KISSIMMEE FL 34741	~~717 WEST BRYAN STREET~~ KISSIMMEE FL ~~34741~~ 34745

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Post Office Box 452377 Suite, Apt. #, etc.
City & State	City & State: Kissimmee FL
Zip / Country	Zip: 34745 / Country: Osceola

4. FEI Number 59-3093016 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~EDDY, DOMENIA A ESQUIRE~~ 717 WEST BRYAN STREET KISSIMMEE FL 34741	Name: Vicki Adams Street Address (P.O. Box Number is Not Acceptable): 1814 Henry St. City: Kissimmee **FL** Zip Code: 34741

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.

SIGNATURE: Victoria J. F. Adams, President — 4/30/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BUTLER, KAREN 2534 E NEPTUNE RD KISSIMMEE FL 34741	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ADAMS, VICKI ~~2322 CARRIAGE RUN RD~~ KISSIMMEE FL 34741	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1814 Henry St.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TORRES, CARMEN R 3803 OAK PT CT KISSIMMEE FL 34746	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ~~NASEEM, JIM~~ ~~966 CALIFORNIA WOODS CIR~~ ~~ORLANDO FL 32824~~	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Donna Doret 3111 Cranes Cove Loop Kissimmee FL 34741	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: ~~Vicki Adams ESQUIRE~~ Vicki Adams 2/27/01 401-933-4109