FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 18 PM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000004629 (2)

1. Corporation Name

THE FRIENDSHIP FELLOWSHIP AT PINEDA, INC.

Principal Place of Business	Mailing Address
P O BOX 580 COCOA FL 32923	P O BOX 580 COCOA FL 32923

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/07/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3190674 ☐ Applied For ☐ Not Applicable

21 2. Principal Place of Business	26 2a. Mailing Address: P.O. Box 580
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State: Cocoa, FL
24 Zip / 25 Country	29 Zip: 32923 / 30 Country: USA

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HOOPER, JAMES A ~~4419 N. COCOA BLVD.~~ 1517 N. Cocoa Blvd COCOA FL 32927 Cocoa FL 32922	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City: FL / 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Pres. ☑ Change ☐ Addition
NAME	DELOACH, JANICE	1.2 NAME	Stanton, Catherine
STREET ADDRESS	29 PARK AVE.	1.3 STREET ADDRESS	1976 Tyler Road
CITY-ST-ZIP	ROCKLEDGE FL	1.4 CITY-ST-ZIP	Melbourne, FL 32935
TITLE	VP	2.1 TITLE	VP ☑ Change ☐ Addition
NAME	OLSEN, RON	2.2 NAME	Jessie, Harold
STREET ADDRESS	670 PALM DR.	2.3 STREET ADDRESS	2600 Bentelm Lane
CITY-ST-ZIP	SATELLITE BCH. FL	2.4 CITY-ST-ZIP	Melbourne, FL 32935
TITLE	T	3.1 TITLE	Treas. ☐ Change ☐ Addition
NAME	SHERMAN, SID	3.2 NAME	
STREET ADDRESS	250 S. SYKE CREEK PKWY., #309B	3.3 STREET ADDRESS	← (Same)
CITY-ST-ZIP	MERRITT ISLAND FL 32952	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	Secy. ☐ Change ☐ Addition
NAME	ROOT, VERNON	4.2 NAME	
STREET ADDRESS	540 S. BREVARD AVE., #447	4.3 STREET ADDRESS	← (Same)
CITY-ST-ZIP	COCOA BCH. FL 32931	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	D ☐ Change ☑ Addition
NAME		5.2 NAME	England, John
STREET ADDRESS		5.3 STREET ADDRESS	271 Forecast Lane
CITY-ST-ZIP		5.4 CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	D	6.1 TITLE	D ☐ Change ☑ Addition
NAME	DELOACH, JANICE	6.2 NAME	Warden, Bryan
STREET ADDRESS	29 PARK AVE.	6.3 STREET ADDRESS	2880 N. Wickham Road #1723
CITY-ST-ZIP	ROCKLEDGE, FL 32955	6.4 CITY-ST-ZIP	Melbourne, FL 32935

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sidney Sherman 04/11/95 (407) 453-8862
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SIDNEY SHERMAN, TREAS. 11 APR '95

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