2001 UNIFORM BUSINESS REPORT (UBR)

May 18, 2001 8:00 am Secretary of State DOCUMENT # N93000004629 1. Entity Name 05-18-2001 90004 015 ****61.25 THE FRIENDSHIP FELLOWSHIP AT PINEDA, INC. Principal Place of Business Mailing Address 3115 FRIENDSHIP PLACE 3115 FRIENDSHIP PLACE ROCKLEDGE FL 32955 ROCKLEDGE FL 32955 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3190674 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent affel Address (P.O. Box Number is Not Acceptable) LEES, JOHN G FORECAIT 1350 CYPRESS TRACE DRIVE MELBOURNE FL 32940 8. The above named entity subhits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. JOHN C. ENGLAND, ADMINISTRATOR SIGNATURE ne of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change Change Addition ☐ Delete TITLE TITLE LEES, JOHN NAME NAME STREET ADDRESS 1350 CYPRESS TRACE DRIVE STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32940 CITY-ST-ZIP TITLE Change ☐ Addition Delete TITLE CONWAY, RICHARD DE LOACH, RUSS NAME NAME 711 AUTUMN GLEW DRIVE STREET ADDRESS 29 PK AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROCKLEDGE FL 32955** ☐ Change Addition TITI F TITLE ☐ Delete DALTON, DONNA NAME NAME 742 DUNCAN RD SE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BAY FL 32909 ☐ Delete ☐ Channe ☐ Addition TITLE TITLE ALLISON, JOE NAME NAME STREET ADDRESS 255 A OCEAN VIEW LANE STREET ADDRESS CITY-ST-ZIP INDIALANTIC FL 32903 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition ABDULLAH, LARRY NAME NAME 140 SEMINOLE COURT STREET ADDRESS 145 CORAL WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INDIATLANTIC FL 32903 Delete TITLE Change ☐ Addition DALTON, BETTE NAME NAME STREET ADDRESS 444 THRUSH DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SATELLITE BEACH FL 32537

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 with all other like empowered.

SIGNATURE:

16 APRIL 2001 321-242-280

FILED