2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2009
Secretary of State

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Entity Name: FRIENDS OF PUBLIC EDUCATION, INC.

Current Principal Place of Business:

NORTH BEACH ELEM
4100 PRAIRE AVE
MIAMI BEACH, FL 33140

New Principal Place of Business:

NORTH BEACH ELEMENTARY
4100 PRAIRIE AVE
MIAMI BEACH, FL 33140

Current Mailing Address:

NORTH BEACH ELEM
4100 PRAIRE AVE
MIAMI BEACH, FL 33140

New Mailing Address:

NORTH BEACH ELEMENTARY
4100 PRAIRIE AVE
MIAMI BEACH, FL 33140

FEI Number: 65-0481047 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALTRESA, SWALINA
C/O FRIENDS OF NORTH BEACH
4100 PRAIRIE AVE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

SWANSON, LESLIE
C/O FRIENDS OF NORTH BEACH
4100 PRAIRIE AVE
MIAMI BEACH, FL 33140 US

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: LESLIE SWANSON 03/08/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SWALINA, ALTRESA
Address: 405 W DILIDO DR.
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete
Name: BALZCI, MARK D
Address: 1929 SUNSET HARBOUR DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD ( ) Delete
Name: SWANSON, LESLIE
Address: 3190 ROYAL PALM AVE.
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GALLIAN, MARINA
Address: 5959 COLLINS AVENUE # 706
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD (X) Change ( ) Addition
Name: BALZI, MARK D
Address: 2383 N BAY RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LESLIE SWANSON MS 03/08/2009
Electronic Signature of Signing Officer or Director Date