2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008
Secretary of State

DOCUMENT# N95000002242

Entity Name: FRIENDS OF THE LANTANA NATURE PRESERVE, INC.

Current Principal Place of Business:

206 N. ATLANTIC DR
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

206 N. ATLANTIC DR
LANTANA, FL 33462

New Mailing Address:

FEI Number: 65-0620324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BALFOUR, HELENE
206 N. ATLANTIC DR
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

BALFOUR, HELENE M P
206 N. ATLANTIC DR
LANTANA, FL 33462 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: HELENE BALFOUR 02/18/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BALFOUR, HELENE
Address: 206 NORTH ATLANTIC DRIVE
City-St-Zip: LANTANA, FL 33462

Title: V ( ) Delete
Name: BROWN, DONNIE
Address: 604 WEST OCEAN AVENUE
City-St-Zip: LANTANA, FL 33462

Title: T ( ) Delete
Name: TAIT, GLORIA
Address: 826 N ATLANTIC DR.
City-St-Zip: LANTANA, FL 33462

Title: S ( ) Delete
Name: PEZZUTO, MARGARET
Address: 410 N ATLANTIC DR.
City-St-Zip: LANTANA, FL 33462

Title: D ( ) Delete
Name: RAUCH, VERONICA
Address: 921 LANDS END RD.
City-St-Zip: LANTANA, FL 33462

Title: D ( ) Delete
Name: BLACK, JUDY
Address: 417 S. ATLANTIC DR.
City-St-Zip: LANTANA, FL 33462

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:

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 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: HELENE BALFOUR P 02/18/2008
Electronic Signature of Signing Officer or Director Date