

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005085

FILED
Mar 22, 2009
Secretary of State

Entity Name: THE FRIENDSHIP FORCE OF SARASOTA, FLORIDA, INC.

Current Principal Place of Business:

4427 OPAL CT
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4427 OPAL CT
SARASOTA, FL 34233

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, WAYNE R
4427 OPAL CT
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DEAN, REETA
Address: 5029 VILLAGE GARDEN DRIVE
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: MCGEE, RAMONA
Address: 5316 DOMINICA CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: T () Delete
Name: FARLEY, JEAN
Address: 7949 PINE GLEN COVE
City-St-Zip: SARASOTA, FL 34238

Title: S () Delete
Name: SCHAEFFER, DONNA
Address: 7670 FAIRWAY WOODS DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: P () Delete
Name: PETERSON, WAYNE
Address: 4427 OPAL COURT
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: HURST, ANN
Address: 6715 JOHN AVENUE
City-St-Zip: ELLENTON, FL 34222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BRUGGER, MARY
Address: 1686 STARLING DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: P (X) Change () Addition
Name: GOODWIN, KATY
Address: 4505 LAKE VISTA DRIVE
City-St-Zip: SARASOTA, FL 34233

Title: T (X) Change () Addition
Name: BURKE, ROBERT
Address: 448 E. RUBENS DRIVE
City-St-Zip: VENICE, FL 34275

Title: S (X) Change () Addition
Name: STRATTON, JUDITH
Address: 608 OXFORD DRIVE
City-St-Zip: VENICE, FL 34293

Title: D (X) Change () Addition
Name: PETERSON, WAYNE
Address: 4427 OPAL COURT
City-St-Zip: SARASOTA, FL 34233

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: KATY GOODWIN

P

03/22/2009

Electronic Signature of Signing Officer or Director

Date