2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001050

FILED Mar 30, 2006 Secretary of State

Entity Name: FRIENDS OF THE FAMILY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

8900 SE ROBWYN STREET HOBE SOUND, FL 33455 US

Current Mailing Address: New Mailing Address:

8900 SE ROBWYN STREET HOBE SOUND, FL 33455 US

FEI Number: 65-0718832 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UBER, GARY P 8900 SE ROBWYN STREET HOBE SOUND, FL 33455 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT () Delete Title: VPT (X) Change () Addition Name: UBER, GARY P

Address: 7914 SE OSPREY ST
City-St-Zip: HOBE SOUND, FL 33455

Name: OBER, GART P
Address: 7914 SE OSPREY ST
City-St-Zip: HOBE SOUND, FL 33455

Title: VPS () Delete Title: PS (X) Change () Addition

 Name:
 SNYDER, KEREN
 Name:
 SNYDER, KEREN B

 Address:
 11251 S.W THUNDER RD
 Address:
 11251 S.W THUNDER RD

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:
 STUART, FL 34997

Title: D () Delete Title: () Change () Addition

 Name:
 UBER, CARMEN
 Name:

 Address:
 7914 SE OSPREY ST
 Address:

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SNYDER, WILLIAM
 Name:

 Address:
 11251 S.W. THUNDER RD
 Address:

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GARY P. UBER VPT 03/30/2006