

FILE NOW: FILING FEE IS \$61.25

FILED
Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000002369 (3)
 1. Corporation Name
SENIOR SOCIETY OF FRIENDS, INC.

Principal Place of Business 116 WEERTS ROAD SAN MATEO FL 32187	Mailing Address 116 WEERTS ROAD SAN MATEO FL 32187
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2. Principal Place of Business 21 SAME	2a. Mailing Address 26 SAME
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Country 29	Zip 30

3. Date Incorporated or Qualified 04/28/1997		
4. FEI Number 59-3445965	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**FAGAN, EUGENE
 10265 150TH COURT NORTH
 JUPITER FL 33478**

10. Name and Address of New Registered Agent

81 Name FAGAN, EUGENE	
82 Street Address (P.O. Box Number is Not Acceptable) 116 WEERTS ROAD	
83	
84 City SAN MATEO FL	85 Zip Code 32187

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **Jan 18 1998**

12. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> DELETE
NAME FAGAN, EUGENE	
STREET ADDRESS 10265 150TH COURT NORTH	
CITY-ST-ZIP JUPITER FL 33478	
TITLE D	<input type="checkbox"/> DELETE
NAME FAGAN, JANET	
STREET ADDRESS 10265 150TH COURT NORTH	
CITY-ST-ZIP JUPITER FL 33478	
TITLE D	<input type="checkbox"/> DELETE
NAME LYLES, DONNA G	
STREET ADDRESS 5100 E ELMHURST RD, STE E	
CITY-ST-ZIP WEST PALM BEACH FL 33417	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME FAGAN, EUGENE	
1.3 STREET ADDRESS 116 WEERTS ROAD	
1.4 CITY-ST-ZIP SAN MATEO FL 32187	
2.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME FAGAN, JANET	
2.3 STREET ADDRESS 116 WEERTS ROAD	
2.4 CITY-ST-ZIP SAN MATEO FL 32187	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **Jan 18 1998** **904-328-6664**

CR2E037 (10/97)