

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005280

FILED
Apr 30, 2009
Secretary of State

Entity Name: FRIENDS OF JENSEN BEACH SCOUTING, INC.

Current Principal Place of Business:

3452 NE SKYLINE DR
JENSEN BEACH, FL 34957

New Principal Place of Business:

968 NW MOSSY OAK WAY
JENSEN BEACH, FL 34957

Current Mailing Address:

3452 NE SKYLINE DR
JENSEN BEACH, FL 34957

New Mailing Address:

968 NW MOSSY OAK WAY
JENSEN BEACH, FL 34957

FEI Number: 65-0810001

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILTON, C N
1935 N.E. RICOU TERRACE
JENSEN BEACH, FL 34957 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: D () Delete
Name: AHERN, KATHY
Address: 1119 NW FORK RD
City-St-Zip: STUART, FL 34994

Title: VD () Delete
Name: GORSUCH, CHUCK
Address: 2950 SE DARIEN RD
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: SD () Delete
Name: JAWORSKI, RAYMOND
Address: 968 NW MOSSY OAK WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD () Delete
Name: SCHROEDER, JOAN
Address: 3452 SKYLINE DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD () Delete
Name: MCGAVOCK, JOSEPH J
Address: 2183 NE MARLBERRY LN
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: MOOTY, LEE
Address: 2470 NE PINECREST LAKES BLVD.
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: JAWORSKI, RAYMOND
Address: 968 NW MOSSY OAK WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD (X) Change () Addition
Name: MCCORD, RON
Address: 1584 NW SPRUCE RIDGE DR
City-St-Zip: STUART, FL 34994

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: JOSEPH J MCGAVOCK

TD

04/30/2009

Electronic Signature of Signing Officer or Director

Date