

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006182

FILED
Apr 14, 2009
Secretary of State

Entity Name: FRIENDS OF TEEN COURT, INC.

Current Principal Place of Business:

57 NICHOLAS COURT
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 674
FLAGLER BEACH, FL 32136

New Mailing Address:

57 NICHOLAS COURT
ORMOND BEACH, FL 32176

FEI Number: 59-3658565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER, REBECCA M
57 NICHOLAS COURT
ORMOND BEACH, FL 32176 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: PD () Delete
Name: MATTHEWS, L CHARLENE
Address: P.O. BOX 674
City-St-Zip: FLAGLER BEACH, FL 32136

Title: SD () Delete
Name: PHILLIPS, ANN
Address: 444 SEABREEZE BLVD., 5TH FLOOR
City-St-Zip: DAYTONA BEACH, FL 32118

Title: TD () Delete
Name: FELBER, PAULA G
Address: 5919 JOHN ANDERSON HWY.
City-St-Zip: FLAGLER BEACH, FL 32136

Title: VD () Delete
Name: ROSSETTI, JUDITH
Address: 1134 DAYTONA AVENUE
City-St-Zip: HOLLY HILL, FL 32117

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:

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: PAULA FELBER

TD

04/14/2009

Electronic Signature of Signing Officer or Director

Date