2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006640

Entity Name: FRIEND OF A FRIEND FOUNDATION, INC.

FILED Apr 26, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1992 YELLOW JACKET DR
CALLAHAN, FL 32011

12450 BISCAYNE BOULEVARD
JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

P.O. BOX 2121 JACKSONVILLE, FL 32203

FEI Number: 59-3512446 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:

GRADY, KENNETH D

1992 YELLOW JACKET DR

CALLAHAN, FL 32011 US

GRADY, KENNETH D

12450 BISCAYNE BOULVARD

SUITE 1324

JACKSONVILLE, FL 32218 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: 04/26/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC () Delete Title: PC (X) Change () Addition

Name: GRADY, KENNETH D Name: GRADY, KENNETH D

Address: 1992 YELLOW JACKET DRIVE Address: 12450 BISCAYNE BOULEVARD SUITE 1324

City-St-Zip: CALLAHAN, FL 32011 City-St-Zip: JACKSONVILLE, FL 32218

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

 Name:
 ASH, JEANETTE M
 Name:

 Address:
 428 S LAINER AVENUE
 Address:

 City-St-Zip:
 FORT MEADE, FL 33841
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 SHUFORD, LARRY D
 Name:

 Address:
 1820 LONGWOOD KEY DRIVE NORTH
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

Name: DANIELS, TAMMY T Name: DANIELS, TAMMY T Address: 4010 SCOTTWOOD DRIVE SOUTH

City-St-Zip: JACKSONVILLE, FL 32203 City-St-Zip: JACKSONVILLE, FL 32209

Title: () Delete Title: SD () Change (X) Addition

Name: Name: COOPER, INONGE

Address: Address: 12450 BISCAYNE BOULEVARD SUITE 422

City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32218

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETH D. GRADY PC 04/26/2005