

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 90857 005 \*\*\*\*61.25

**DOCUMENT # N99000001447**

1. Entity Name

**FRIENDSHIP COMMUNITY DEVELOPMENT, INC.**

Principal Place of Business

Mailing Address

**385 S. BARNETT RD.  
 COCOA FL 32926**

**385 S. BARNETT RD.  
 COCOA FL 32926**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2597924**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BUCKNER, EDWARD REV.  
 385 S. BARNETT RD.  
 COCOA FL 32926**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP**  Delete  
 NAME **BUCKNER, EDWARD REV**  
 STREET ADDRESS **3703 BROPHY BLVD.**  
 CITY-ST-ZIP **COCOA FL 32926**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D**  Delete  
 NAME **BRANT, BILLIE**  
 STREET ADDRESS **3705 BROPHY BLVD.**  
 CITY-ST-ZIP **COCOA FL 32926**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **DV**  Delete  
 NAME **BATTLE, IZEAL**  
 STREET ADDRESS **325 S. BURNETT RD.**  
 CITY-ST-ZIP **COCOA FL 32926**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **STD**  Delete  
 NAME **BROWN, RUBY M**  
 STREET ADDRESS **3782 CATALINA DR.**  
 CITY-ST-ZIP **COCOA FL 32926**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D**  Delete  
 NAME **BRAGGS, GUSSIE**  
 STREET ADDRESS **3811 KENNEDY CIR.**  
 CITY-ST-ZIP **COCOA FL 32926**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

*[Handwritten Signature]*

4/29/02 6366480 7204

CR2E037 (9/01)