

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 02, 2008 8:00 am**  
**Secretary of State**

05-02-2008 90140 016 \*\*\*\*70.00



4

**DOCUMENT # N99000001447**  
 1. Entity Name  
**FRIENDSHIP COMMUNITY DEVELOPMENT, INC.**

Principal Place of Business  
**385 S. BARNETT RD.  
 COCOA, FL 32926**

Mailing Address  
**385 S. BARNETT RD.  
 COCOA, FL 32926**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

04292008 Chg-NP CR2E037 (12/06)

**6. Name and Address of Current Registered Agent**  
**ROBERTS, SAM**  
**385 S. BARNETT RD.**  
**COCOA, FL 32926**

4. FEI Number  
**59-2597924**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**7. Name and Address of New Registered Agent**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	DP	<input type="checkbox"/> Delete
NAME	ROBERTS, SAM	
STREET ADDRESS	3130 IPSWICH DRIVE	
CITY-ST-ZIP	COCOA, FL 32926	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRANT, BILLIE	
STREET ADDRESS	3705 BROPHY BLVD.	
CITY-ST-ZIP	COCOA, FL 32926	
TITLE	DV	<input type="checkbox"/> Delete
NAME	BATTLE, IZEAL	
STREET ADDRESS	325 S. BURNETT RD.	
CITY-ST-ZIP	COCOA, FL 32926	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BRITT, RUBY	
STREET ADDRESS	3782 CATALINA DR.	
CITY-ST-ZIP	COCOA, FL 32926	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRAGGS, GUSSIE	
STREET ADDRESS	3811 KENNEDY CIR.	
CITY-ST-ZIP	COCOA, FL 32926	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brant Billie	
STREET ADDRESS	3705 Brophy Blvd	
CITY-ST-ZIP	Cocoa, FL 32926	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

**SIGNATURE:** Billie Brant **04/30/2008** **(321) 636-6980**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #