

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003643

FILED
Jan 11, 2006
Secretary of State

Entity Name: FRIENDS OF ACT-SO, INC.

Current Principal Place of Business:

2329 NW 14TH ST.
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2329 NW 14TH ST.
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-1006854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINTON, HELEN
2329 NW 14TH ST.
FORT LAUDERDALE, FL 33311 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: HINTON, HELEN
Address: 2329 NW 14TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VCD () Delete
Name: RANDOLPH, DIANE
Address: 433 NORTHWEST 14 WAY
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: SD () Delete
Name: NOBLES, SANDRA
Address: 431 NW 48TH TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: TD () Delete
Name: ROEBUCK, JANICE
Address: 626 NORTHWEST 4 COURT #3
City-St-Zip: HALLANDALE, FL 33009

Title: COR () Delete
Name: DUBOSE, BOBBY
Address: 3333 COCOPLUM CIRCLE
City-St-Zip: COCONUT CREEK, FL 33063

Title: FC () Delete
Name: DUBOSE, YVETTE
Address: 3333 COCOPLUM CIRCLE
City-St-Zip: COCONUT CREEK, FL 33063

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:

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 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: HELEN HINTON

D

01/11/2006

Electronic Signature of Signing Officer or Director

Date