## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000003643

Entity Name: FRIENDS OF ACT-SO, INC.

FILED Jan 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2329 NW 14TH ST. FORT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** 2329 NW 14TH ST FORT LAUDERDALE, FL 33311 FEI Number: 65-1006854 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: HINTON, HELEN 2329 NW 14TH ST. FORT LAUDERDALE, FL 33311 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HINTON, HELEN Name: Name: 2329 NW 14TH ST. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: VCD () Delete Title: () Change () Addition RANDOLPH, DIANE Name: Name: Address: 433 NORTHWEST 14 WAY Address: City-St-Zip: FORT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition NOBLES, SANDRA Name: Name: Address: 431 NW 48TH TERRACE Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: ROEBUCK, JANICE Name: 626 NORTHWEST 4 COURT #3 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: COR () Delete Title: COR (X) Change ( ) Addition DUBOSE, BOBBY Name: Name: DUBOSE, BOBBY 3333 COCOPLUM CIRCLE 429 NORTHWEST 11 TERRACE Address: Address: FORT LAUDERDALE, FL 33311 City-St-Zip: COCONUT CREEK, FL 33063 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DUBOSE, YVETTE DUBOSE, YVETTE Name: Name: Address: 3333 COCOPLUM CIRCLE Address: 429 NORTHWEST 11 TERRACE COCONUT CREEK, FL 33063 FORT LAUDERDALE, FL 33311 City-St-Zip: 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 01/08/2007