2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P28051

MCGRORY, KARI F

1532 E MCGRAW ST

SEATTLE, WA 98112

Name:

Address:

City-St-Zip:

FILED Apr 21, 2007 Secretary of State

Entity Nar	ne: ED FRIEN	ND, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
STE 315	NECTICUT AV TON, DC 200	·			
Current Mailing Address:			New Mailing Address:		
STE 315	NECTICUT AV TON, DC 200				
FEI Number:	52-1659394	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
FRIEND, EDWARD H 17569 BAYVIEW RD #122 BOCA RATON, FL 33434 US			3900 GALT OCEAN [APT 2115	NESBITT, FREDERICK H 3900 GALT OCEAN DRIVE APT 2115 FORT LAUDERDALE, FL 33308 US	
	named entity s of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: FREDERICK H. NESBITT				04/21/2007	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FRIEND, EDWA	FICUT AVE, NW, #315	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CROWDER, A. 159 EAST AVE NEW CANAAN,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () MCCRORY, RC 1532 E MCGRA SEATTLE, WA	W ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	s ()	Delete	Title:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: EDWARD H. FRIEND Ρ 04/21/2007