

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734377

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** THE FRIENDLY NATIVE BEACH RESORT CONDOMINIUM, INC.

**Current Principal Place of Business:**

6700 SUNSET WAY  
ST PETERSBURG BEACH, FL 337062053

**New Principal Place of Business:**

**Current Mailing Address:**

6700 SUNSET WAY  
ST PETERSBURG BEACH, FL 337062053

**New Mailing Address:**

FEI Number: 59-1656341      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HURLEY, J. K  
6700 SUNSET WAY  
ST PETERSBURG BEACH, FL 33706      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: PD      ( ) Delete  
Name: FRISSORA, TED  
Address: 643 WHITETAIL DR  
City-St-Zip: GAHANG, OH

Title: VD      ( ) Delete  
Name: MARTINS, JOHN  
Address: 6 LINKS LN  
City-St-Zip: BRAMPRON, ONTARIO CANADA,

Title: SD      ( ) Delete  
Name: ALMERIC, MARJORIE  
Address: 807 W INDIANA AVE.  
City-St-Zip: TAMPA, FL

Title: TD      ( ) Delete  
Name: GARCIA, DULCE MARIA V  
Address: 4808 DARBY AVE.  
City-St-Zip: TAMPA, FL

Title: D      ( ) Delete  
Name: SWENSON, GLENN  
Address: 3521-6TH AVE.,N.  
City-St-Zip: ST.PETERSBURG, FL

Title: D      ( ) Delete  
Name: MARTINEZ A G  
Address: 908 W VIRGINIA AVE  
City-St-Zip: TAMPA, FL

**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 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: TED FRISSORA

PD

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date