2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700123

FILED Apr 25, 2007 Secretary of State

Entity Name: WINTER PARK LIBRARY ASSOCIATION INC. **Current Principal Place of Business: New Principal Place of Business:** 460 E NEW ENGLAND AVENUE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 460 E NEW ENGLAND AVENUE WINTER PARK, FL 32789 FEI Number: 59-0794396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MELANSON, ROBERT G D 460 E. NEW ENGLAND AVE. WINTER PARK, FL 32789 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: () Delete (X) Change () Addition REED, ROBERT S REED, ROBERT S Name: Name: 1850 VIA TUSCANY Address: 301 VIRGINIA DRIVE Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: Title: () Delete () Change () Addition VAN VALKENBURGH, MARK L Name: Name: Address: 227 S. ORLANDO AVE. SUITE B-1 Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: () Change () Addition MELANSON, ROBERT G Name: Name: 460 E NEW ENGLAND AVENUE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: ST () Delete Title: ST (X) Change () Addition Name: BARNES, DIANA Name: AHL, WENDY W 7 ISLE OF SICILY Address: Address: 920 MOSS LANE City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: () Change () Addition SPENCE, MARNI J Name: Name: 1400 W. FAIRBANKS AVE, SUITE 102 Address: Address: City-St-Zip: WINTER PARK, FL 32789 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: ROBERT G. MELANSON D 04/25/2007