

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90010 034 ****61.50

DOCUMENT # 733592

1. Entity Name

FRIENDS OF THE BROWARD COUNTY LIBRARY, INC.

Principal Place of Business

100S ANDREWS AVE
 FT LAUDERDALE FL 33301

Mailing Address

100S ANDREWS AVE
 FT LAUDERDALE FL 33301-1830

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2214644

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WILNER, HANNAH
100 S ANDREWS AVE
1750 E SUNRISE BLVD
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 H. Wilner **ADMIN. DIR.**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

| | | |
|----------------|-----------------------|--|
| TITLE | CD | <input checked="" type="checkbox"/> Delete |
| NAME | HAMILTON, CLINTON D | |
| STREET ADDRESS | 7220 NW 5TH COURT | |
| CITY-ST-ZIP | PLANTATION, FL 00000 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | ELINORE SULLIVAN | |
| STREET ADDRESS | 405 N OCEAN BLVD #217 | |
| CITY-ST-ZIP | POMPANO BCH FL | |
| TITLE | PD | <input checked="" type="checkbox"/> Delete |
| NAME | WOLFMAN, JUDITH | |
| STREET ADDRESS | 640 SW 62ND AVE | |
| CITY-ST-ZIP | PLANTATION FL | |
| TITLE | VD | <input type="checkbox"/> Delete |
| NAME | CHADWICK, HELEN | |
| STREET ADDRESS | 1744 SE 9TH ST | |
| CITY-ST-ZIP | FT LAUDERDALE FL | |
| TITLE | RSD | <input checked="" type="checkbox"/> Delete |
| NAME | ERICKSON, ANNA, LEE | |
| STREET ADDRESS | 2799 NW 69TH AVE | |
| CITY-ST-ZIP | SUNRISE FL | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|------------------------|---|
| TITLE | PD | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | GEORGE J. BOLTON | |
| STREET ADDRESS | 5775 SW 88TH AVE. | |
| CITY-ST-ZIP | COOPER CITY, FLA 33328 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | RSD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ANN NAVES | |
| STREET ADDRESS | 4520 NW 16TH ST. | |
| CITY-ST-ZIP | LAUDERHILL, FL 33313 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. Wilner **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/00

Date

954 357 7538

Daytime Phone #

CR2E037 (9/99)