

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733592

FILED  
Jun 29, 2009  
Secretary of State

Entity Name: FRIENDS OF THE BROWARD COUNTY LIBRARY, INC.

**Current Principal Place of Business:**

100 S. ANDREWS AVE.  
8TH FLOOR  
FT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

100 S. ANDREWS AVE.  
8TH FLOOR  
FT LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 59-2214644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

REYNOLDS, JOHN  
100 S ANDREWS AVE  
FT LAUDERDALE, FL 33301      US

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

CORRELL, BARBARA J  
100 S ANDREWS AVE  
FT LAUDERDALE, FL 33301      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: BARBARA J. CORRELL

06/29/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GROOMS, EVELYN  
Address: 100 S. ANDREWS AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T      ( ) Delete  
Name: REYNOLDS, JOHN  
Address: 100 S. ANDREWS AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S      ( ) Delete  
Name: LEE, MARLENE  
Address: 100 S. ANDREWS AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T      (X) Change ( ) Addition  
Name: CORRELL, BARBARA J  
Address: 100 S. ANDREWS AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S      (X) Change ( ) Addition  
Name: DE ROSA, JOYCE  
Address: 100 S. ANDREWS AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33301

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: BARBARA J. CORRELL

TREA

06/29/2009

Electronic Signature of Signing Officer or Director

Date