NONPROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 749397**

 Corporation Name FRIENDS OF THE LARGO LIBRARY, INC.

Principal Place of Business 351 EAST BAY DRIVE LARGO FL 34840 33770 Mailing Address

351 EAST BAY DRIVE LARGO FL 24649-33770

## **FILED** Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90119 018 \*\*\*\*61.25

470007 - 90047 - 33



				3. Date Incorporated or Qualifed			į
2. Principal Pl	lace of Business	2a. Mailing Address		10/18/1979		İ	
21		26		4. FEI Number	Tapoli	ed For	ı
Suite, Apt.	#, etc.	Suite, Apt #, etc.		59-2386991 3 2 2 5 7 8 3		Applicable	
22		27 City 9 City		35-239059-1 3 K K 3 / 8 3	\$8.75 Add		
City & State	8	City_8_State		5. Certificate of Status Desired == 12 =	Fee Requ		-
23) Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 M	av Be	
<del>-</del>	25	29 30	ลี ์	Trust Fund Contribution	Added to I		
24	9. Name and Address of Current	<u> </u>	<u> </u>	10. Name and Address of New Registered	Agent		
	3. Maine and Address of Culture	- Cogratorou rigorii	81 Name	VIRGINIA G. ENGLAND			
DE0 4 Dr'/	IOUR ATTORNEY AT LAW		82 Street Address (P.O. Box Number is Not Acceptable)				
	JOHN, ATTORNEY AT LAW		FIRST UNION BANK BUILDING				
	RWATER-LARGO ROAD SW						
Largo Fl	. 34640		83 801 WEST BAY DRIVE, SUITE 506				
			84 City Z	argo Fi		-3220	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,			I changing its re-	gistered	
office or re agent. I a	egistered agent, or both, in the State of the familiar with, and accept the obligation	Florida. Such change was author of Section 617 0503, Florid	a Statutes	about a board of offectors. The obly accept and appe	Antment as regis	ileter)	
SIGNATURE	MINISTRUM /		VIRGINI prestered Agent signature re	B C. EMOLVIND CAL 21	31/44	{	€
12.	Signature, typed or pryedid name of registered agents	<del></del>	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	S IN 12	(11/98)
		DELETE			N Change	☐ Addition	Ξ
TITLE	P	-25 5020.0	1.2 NAME	STEVENS, RENA 236 LARK DRIVE SW			
NAME	WILKINS, MYRTLE		1.2 NAME	236 LARK DRIVE SW			ဗ
STREET ADDRESS	2465 PARK DR		1	LARGO, FL 53778		ŀ	2
CITY-ST-ZIP	LARGO, FL 00000 33771		14 CITY-ST-ZIP	LARGO, TL 35116	Change	Addition	CR2E037
TITLE	l v	✓ DELETE	21 TITLE	VP	(A) cusude	_ AGGILGI	_
NAME	STEVENS, RENA		22 NAME	JOSEPH B. DOBKIN 9612 TARA CAY CT. SEMINOLG, FL 33776		1	
STREET ADORESS	236 LARK DR. S.W.		23 STREET ADDRESS	9612 TARA CAY CT.		Į.	
CITY-ST-ZIP	LARGO FL 33778		2 4 CITY-ST-ZIP	SEMINOLG, FL 33776			ı
TITLE	T	☐ DELETE	3 t TITLE	•	Change	Addition	
NAME	ONG, LIANNE S .		32 NAME			-	
STREET ADDRESS			13 STREET ADDRESS -				==
CITY-ST-ZP	LARGO FL 33770		34 CITY-ST-ZIP				
TITLE		☐ DELETE	41 MILE		☐ Change	Addition	1
NAME	AT NOOTED KATUDYA)	_	4 2 NAME			Į	
	PORTER, KATHRYN		43 STREET ADDRESS			j	ĺ
STREET ADORESS	000 11117172. 11.111		44 CITY-ST-ZIP			- 1	
CITY-ST-ZIP	LARGO FL 33770	DELETE	51 TITLE		Change	Addition	
TITLE	RS	T) pereie	52 NAME			~	
NAME	Burgess, Ruth			4550 COVE CIRCLE, API	1.1108		
STREET ADDRESS	19417 GULF BLVD #F110		53 STREET ADDRESS	TOOL COL CITCE, IT!	7.0	1	
CITY-ST-ZIP	INDIAN ROCKS BCH FL 33785		54 CITY-ST-ZIP	MADEIRA BEACH, FL 33	□ Change	Addition	
MILE	D	☐ DELETE	61 TITLE		[_] Change		
NAME	DONALDSON, EMILY		62 NANE				
STREET ADDRESS	105 HARBOR VIEW LANE		63 STREET ADDRESS			ţ	ſ
CITY-ST-ZIP	1 ADGO EL 33770		64 CITY-ST-ZIP				
14. I hereby o	notify that the information symplind with	this filing does not qualify for th	e exemption stated	in Section 119.07(3)(i), Florida Statutes, I further ce ture shall have the same legal effect as if made und	intity that the info	irmation m an	
indicated	on this annual report of supplemental a	mmuar report is true and accurat	e and marmy signa	tota ation trata the selline leads of order on it made the			

indicated on this amiliar report or suppremental annual report is five and accurate and mariffy signature shall have the same legal effect as it made under dark; that if a officer or director of the corporation or the receiver or trustee empowered to exclude this report as required by Chapter 617, Floride Statutes; and that my name appearable to 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: