

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

95 APR -6 AM 6:12

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 769309 (6)

1. Corporation Name

**FRIENDS OF THE NORTH INDIAN RIVER COUNTY LIBRARY
, INC.**

Principal Place of Business

Mailing Address

**P O BOX 781313
SEBASTIAN FL 32978**

**P O BOX 781313
SEBASTIAN FL 32978**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2325278

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

**\$0.75 Additional
Fee Required**

6. Election Campaign Financing

Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VANDEVOORDE, RENE G.
1327 NORTH CENTRAL AVE
SEBASTIAN FL 32958**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

DERRICK, EILEEN

STREET ADDRESS

825 BARKER STREET

CITY - ST - ZIP

SEBASTIAN FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

VD

NAME

BERTRAM, JEAN

STREET ADDRESS

1285 GEORGE ST

CITY - ST - ZIP

SEBASTIAN FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☒ Change ☐ Addition

**VD
Margaret Kamakaris
821 Doctor Ave.
Sebastian, FL 32958**

TITLE

TD

NAME

O'CONNOR, MILDRED E.

STREET ADDRESS

534 S MIRROR LAKE DRIVE

CITY - ST - ZIP

SEBASTIAN FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

SD

NAME

O'CONNOR, ELIZABETH

STREET ADDRESS

491 THOMAS ST

CITY - ST - ZIP

SEBASTIAN FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

CD

NAME

MCMANUS, BARBARA

STREET ADDRESS

13380 INDIAN RIVER DR

CITY - ST - ZIP

SEBASTIAN FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☒ Change ☐ Addition

**CD
Alice Russell
406 Perch Lane
Sebastian, FL 32958**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mildred E. O'Connor, Treasurer

407 589-9236

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature #