2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 18, 2008 8:00 am DOCUMENT # N01116 **Secretary of State** 1. Entity Name 02-18-2008 90009 003 ****61.25 EUSTIS LIBRARY FOUNDATION, INC. Principal Place of Business Mailing Address 120 N. CENTER STREET C/O STEVEN BENETZ EUSTIS FL 32726 120 N. CENTER STREET C/O STEVEN BENETZ EUSTIS FL 32726 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2368221 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENETZ, E. STEVEN Street Address (P.O. Box Number is Not Acceptable) 120 N. CENTER STREET EUSTIS FL 32726 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 Fiorida. I am familiar with, and accept the obligations of registered agent. / E.Steven Benetz, Jr. 2-7-08 SIGNATURE (NOTE: Registered Agent signature (equired when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 / 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Treasurer HAMMOND, JACK NAME NAME BLECKLEY-YARBROUGH, DAWN STREET ADDRESS 326 N. ROSSITER STREET STREET ADDRESS 37350 Oak Lane Eustis, FL 32727 MOUNT DORA FL 32757 CITY - ST - ZIP CITY-ST-ZiP Delete TITLE ☐ Change ☐ Addition BENETZ, E. STEVEN NAME NAME 1503 TYRINGHAM ROAD STREET ADDRESS STREET ADDRESS EUSTIS FL CITY ST 7 IP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition TRASK, ALTA NAME NAME 18 FOREST LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **EUSTIS FL** CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change Addition LE HEUP, WILLIAM MAME STREET ADDRESS 434 E. LÉMON AVE STREET ADDRESS EUSTIS FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 111116 ☐ Change ☐ Addition MOULDEN, ROBERT L NAME NAME PO BOX 1493 STREET ADDRESS STREET ADDRESS **EUSTIS FL** CITY - ST - ZIP CiTY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition STONE, LEWIS NAME NAME 10 VILLA WAY STREET ADDRESS STREET ADDRESS EUSTIS FL CITY-ST-7IP CITY-ST-ZIP

FILED

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:

E. STEVEN DENETZTR 2-10-08-352-351 -5686

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information