

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011785

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** THE FRIENDS OF THE WEST ST. PETERSBURG COMMUNITY LIBRARY, INC.

**Current Principal Place of Business:**

6605 5TH AVE N  
ST PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

6605 5TH AVE N  
ST PETERSBURG, FL 33710

**New Mailing Address:**

FEI Number: 43-2091349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WENSTROM, ELAINE R TREAS.  
7321 6TH AVE NORTH  
ST PETERSBURG, FL 33710 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RUGA, LUCILLE  
Address: 1698 63RD ST N  
City-St-Zip: ST PETERSBURG, FL 33710

Title: VP  
Name: GREENE, ANNE  
Address: 6605 5TH AVENUE N  
City-St-Zip: ST PETERSBURG, FL 33710

Title: S  
Name: MONTGOMERY, JOANNE  
Address: 7300 SUN ISLE DRIVE, ADMIRAL 201  
City-St-Zip: SOUTH PASADENA, FL 33707

Title: T  
Name: WENSTROM, ELAINE R  
Address: 7321 6TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33710

I hereby 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 all other like empowered.

SIGNATURE: LUCILLE RUGA

P

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date