

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001998

FILED
Mar 24, 2010
Secretary of State

Entity Name: FRIENDS OF THE BOOKMOBILE OF ST. JOHNS COUNTY, INC.

Current Principal Place of Business:

%ST.JOHNS CO. PUBLIC LIBRARY SYSTEM
6670 US 1 SOUTH
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

%ST.JOHNS CO. PUBLIC LIBRARY SYSTEM
6670 US 1 SOUTH
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 36-4653133 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FREDERICK, BETTY B
6670 US 1 SOUTH
ST. AUGUSTINE, FL 32086 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: PD
Name: MCKENDRICK, CASEY
Address: 349 ABBEY AVE.
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VD
Name: BARRETT, JAMES J
Address: 1326 CASTLE PINES CIR.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VD
Name: TRAYLOR, ALINE
Address: 1000 VICAR'S LANDING WAY #C-308
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD
Name: VIESON, SUSANNE
Address: 10135 AMOS AVE.
City-St-Zip: HASTINGS, FL 32145

Title: TD
Name: JONES, ELIZABETH
Address: 20 LEE DR.
City-St-Zip: ST. AUGUSTINE, FL 32080

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: BETTY B. FREDERICK

RA

03/24/2010

Electronic Signature of Signing Officer or Director

Date