1 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2005 8:00 am Secretary of State

941)76+3390

DOCUMENT # N10107 1. Entity Name THE LIBRARY FOUNDATION, INC.									07-19-2005	90039	045 ****6	1.25
Principal Place of Business 1301 BARCARROTA BLVD. W. BRADENTON, FL 34205				Mailing Address 1301 BARCARROTA BLVD. W. BRADENTON, FL 34205				50056106				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				06302005	Chg-NP	CR2E	037 (10/03)	
City & State				City & State				4. FEI Number 59-25903	87		 	oplied For
Zip Country			Zi	Zip Coi			5. Certificate of Status Desired See Required Fee Required					ditional
6. Name and Address of Current R				egistered Agent			7. Name and Address of New Registered Agent					
PORGES, GREGORY J. 1205 MANATEE AVE WEST BRADENTON, FL 34205					Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code							
	ions of regist					ed office o		· · · · · · · · · · · · · · · · · · ·	n the State of Fi		n familiar with,	
	Signature, typed	or printed name of registered agent	and title if ap	plicable. (NOTE	E: Registere	d Agent signal	ure required	t when reinstating)		DATE		
Filing Fee is \$61.25 Due by September 7, 2005				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees			ck payable to artment of Si	
10.	•••••	OFFICERS AND DI	RECTORS	i	11.			ADDITIONS/CHAN	GES TO OFFICE	RS AND E	DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP		JAMIE RCARROT BLVD W TON; FL 34205		🔼 Delete		E	301	ebey, Marl 32nd St W lenton, FL			☐ Change	⊠ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	222 10TH	H-PENDER, MARIE		☐ Delete			PD		JALVJ		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		KEL, JOHN C LUMBIA DR TON, FL		☐ Delete					• "	· -	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		RBARA T ERVIEW BLVD RADENTON, FL		☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1416 51S	ONG, ROBERT J. T STREET W TON, FL 34205		⊠ Delete			2203	s, Steven 67th St	V		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PORGES 1201 MAN BRADEN	NATEE AVE. WEST		□ Delete							☐ Change	☐ Addition
indicated of the cor	on this repo poration or the	e information supplied with it or supplemental report is the receiver or trustee emp achment with an address,	s true and owered to	accurate and that no execute this report	ny signa as requi	ture shall h	ave the :	same legal effect a	s if made under	oath: that	I am an officer	or director

14 1500 IG OFFICER OR DIRECTOR