


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90360 043 \*\*\*\*61.25

<b>DOCUMENT # N38686</b>					
1. Entity Name FRIENDS OF THE ISLAND LIBRARY, INC.					
Principal Place of Business 5701 MARINA DRIVE HOLMES BCH, FL 34217 US			Mailing Address 5701 MARINA DRIVE HOLMES BCH, FL 34217 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 61-0161681	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BLAGDON, EDWARD A 608 CONCORD LANE HOLMES BEACH, FL 34217			Name <u>EAST, JARED G.</u> Street Address (P.O. Box Number is Not Acceptable) <u>687 PENFIELD ST</u> City <u>LONGBOAT KEY</u> FL Zip Code <u>34225</u>		
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 Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Jared G. East</u>		<u>JARED G. EAST</u>		DATE <u>4-13-06</u>	
Filing Fee is <b>\$61.25</b> Due by <b>May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOEFIG, PAT		NAME	MARCY EAST	
STREET ADDRESS	526 7TH STREET		STREET ADDRESS	687 PENFIELD ST	
CITY-ST-ZIP	HOLMES BEACH, FL 34217		CITY-ST-ZIP	LONGBOAT KEY, FL 34225	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EAST, MARCY		NAME	EAST, JARED G	
STREET ADDRESS	687 PENFIELD STREET		STREET ADDRESS	687 PENFIELD ST	
CITY-ST-ZIP	LONGBOAT KEY, FL 34228		CITY-ST-ZIP	LONGBOAT KEY, FL 34225	
TITLE	S	<input type="checkbox"/> Delete	TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEVILLE, BEVERLY		NAME	JULIE BELL	
STREET ADDRESS	8309 MARINA DRIVE		STREET ADDRESS	506 6TH ST	
CITY-ST-ZIP	HOLMES BEACH, FL 34217		CITY-ST-ZIP	HOLMES BEACH, FL 34217	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLAGDON, ED		NAME		
STREET ADDRESS	608 CONCORD LN		STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH, FL 34217		CITY-ST-ZIP		
TITLE	MC	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOWALSKI, MARY		NAME		
STREET ADDRESS	233 S HARBOR DRIVE APT B		STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH, FL 34217		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EICHORN, MARDENE		NAME		
STREET ADDRESS	622 GLADSTONE LN		STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH, FL 34217		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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: <u>Jared G. East</u>		<u>JARED G. EAST</u>		DATE <u>4-13-06</u> 941.387.8224	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	