

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38686

FILED
Apr 20, 2008
Secretary of State

Entity Name: FRIENDS OF THE ISLAND LIBRARY, INC.

Current Principal Place of Business:

5701 MARINA DRIVE
HOLMES BCH, FL 34217 US

New Principal Place of Business:

Current Mailing Address:

5701 MARINA DRIVE
HOLMES BCH, FL 34217 US

New Mailing Address:

FEI Number: 51-0161681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBER, DAVID M
5400 GULF DRIVE, #31
HOLMES BEACH, FL 34217 US

Name and Address of New Registered Agent:

WEBER, DAVID M
5400 GULF DRIVE, #32
HOLMES BEACH, FL 34217 US

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: DAVID WEBER

04/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BELL, JOLIE
Address: 506 67TH STREET
City-St-Zip: HOLMES BEACH, FL 34217

Title: VP () Delete
Name: NEVILLE, BEVERLY
Address: 8309 MARINA DRIVE
City-St-Zip: HOLMES BEACH, FL 34217

Title: SECR () Delete
Name: BACKER, ROSEMARY
Address: 508 74TH STREET
City-St-Zip: HOLMES BEACH, FL 34217

Title: TRES () Delete
Name: WEBER, DAVID
Address: 5400 GULF DRIVE, #31
City-St-Zip: HOLMES BEACH, FL 34217

Title: DIR () Delete
Name: KOWALSKI, MARY
Address: 233 S HARBOR DRIVE APT B
City-St-Zip: HOLMES BEACH, FL 34217

Title: DIR () Delete
Name: EICHHORN, MARDENE
Address: 622 GLADSTONE LN
City-St-Zip: HOLMES BEACH, FL 34217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOLIE BELL

PRES

04/20/2008

Electronic Signature of Signing Officer or Director

Date