

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002780

FILED  
Apr 19, 2006  
Secretary of State

Entity Name: LIBRARY LITERACY FRIENDS, INC.

## Current Principal Place of Business:

4639 LAKE WORTH RD  
LAKE WORTH, FL 33463

## New Principal Place of Business:

## Current Mailing Address:

4639 LAKE WORTH RD  
LAKE WORTH, FL 33463

## New Mailing Address:

FEI Number: 65-0418364

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GINSBERG, MAXINE  
LIBRARY LITERACY FRIENDS  
4639 LAKE WORTH ROAD  
LAKE WORTH, FL 33463 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: VD ( ) Delete  
Name: GREENBERG, ELEANOR  
Address: 14098 CAMPANELLI DR  
City-St-Zip: DELRAY BEACH, FL 33484

Title: TD ( ) Delete  
Name: MAXINE, GINSBERG  
Address: 4784 BRIGHTDON LAKES BLVD  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: PD ( ) Delete  
Name: WOLF, ROSE L  
Address: 13312-B VIA VESTA  
City-St-Zip: DELRAY BEACH, FL 33484

Title: SD ( ) Delete  
Name: ETtinger, Sharon C  
Address: 6365 SO. FICUS LANE  
City-St-Zip: LANTANA, FL 33462

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: MAXINE GINSBERG

TD

04/19/2006

Electronic Signature of Signing Officer or Director

Date