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Jan 23 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000003446 (1)

1. Corporation Name:

FRIENDS OF THE OAKLAND PARK LIBRARY, INC.



Principal Place of Business

Mailing Address

1298 N.E. 37TH ST.
OAKLAND PARK FL 33334

1298 N.E. 37TH ST.
OAKLAND PARK FL 33334-4569

3. Date Incorporated or Qualified
07/08/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0505125

Applied For
Not Applicable

21 Suite Apt. # etc

26 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GOLD, CAROL
3650 N.E. 12TH AVE.
OAKLAND PARK FL 33334

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME HARDY, THOMAS E.
STREET ADDRESS 4421 N.E. 19TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL

1.1 TITLE PD Change Addition
1.2 NAME H. Keneth Powell
1.3 STREET ADDRESS 702 N.E. 33rd Street
1.4 CITY-ST-ZIP Oakland Park, Fl.

TITLE VD DELETE
NAME TOPA, HERBERT (
STREET ADDRESS 4101 N.E. 18TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL

2.1 TITLE VD Change Addition
2.2 NAME Joan R. Parlow
2.3 STREET ADDRESS 1750 N.E. 38th Street
2.4 CITY-ST-ZIP Oakland Park, Fl.

TITLE TD DELETE
NAME PAVELKA, BEVERLY M
STREET ADDRESS 3064 N.E. 14TH AVENUE
CITY-ST-ZIP OAKLAND PARK FL

3.1 TITLE TD Change Addition
3.2 NAME M. Patricia Reynolds
3.3 STREET ADDRESS 1921 N.E. 43rd Street
3.4 CITY-ST-ZIP Oakland Park, Fl.

TITLE SD DELETE
NAME PARLOW, JOAN R.
STREET ADDRESS 1750 NE 38TH STREET
CITY-ST-ZIP OAKLAND FL

4.1 TITLE SD Change Addition
4.2 NAME Rose T. Keller
4.3 STREET ADDRESS 1914 N.W. 36th Court
4.4 CITY-ST-ZIP Oakland Park, Fl.

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *M Patricia Reynolds*
SIGNATURE: TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-97
Date

(954) 772-4294
Daytime Phone # 0037672

CR2E037 (9/96)