2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003446

FILED Feb 03, 2009 Secretary of State

Entity Name: FRIENDS OF THE OAKLAND PARK LIBRARY, INC.

Current Principal Place of Business: New Principal Place of Business: 1298 N.E. 37TH ST. 1298 N.E. 37TH ST. OAKLAND PARK, FL 33334 OAKLAND PARK, FL 33334 US **Current Mailing Address: New Mailing Address:** 1298 N.E. 37TH ST. 1298 N.E. 37TH ST. OAKLAND PARK, FL 33334 OAKLAND PARK, FL 33334 US FEI Number: 65-0505125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHLUTER, DONALD 1983 NW 45TH STREET OAKLAND PARK, FL 33309 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HARDY, THOMAS E Name: Name: 4421 NE 19TH AVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33308 City-St-Zip: Title: VD () Delete Title: () Change () Addition MITCHELL, DARLEEN Name: Name: Address: 1584 NE 33RD ST Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: Title: () Delete Title: (X) Change () Addition POWELL, JOANNE POWELL, JOANNE Name: Name: Address: 702 NE 33RD ST Address: 702 NE 33RD ST City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334 Title: VD () Delete Title: TD (X) Change () Addition Name: FLEISCHMAN, EDITH Name: FLEISCHMAN, EDITH 1841 NE 43RD STREET Address: Address: 1841 NE 43RD STREET City-St-Zip: OAKLAND PARK, FL 33308 City-St-Zip: OAKLAND PARK, FL 33308 Title: () Delete Title: (X) Change () Addition D'ADDEZIO, EILEEN J D'ADDEZIO, EILEEN J Name: Name: 3440 NW 21ST AVE 3440 NW 21ST AVE Address: Address: City-St-Zip: OAKLAND PARK, FL 33309 City-St-Zip: OAKLAND PARK, FL 33309 Title: () Delete Title: () Change () Addition ARNOLD, CLARENCE L Name: Name: Address: 2148 NE 27TH DR. Address: WILTON MANORS, FL 33306 City-St-Zip: 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: THOMAS E. HARDY PD 02/03/2009