2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 27, 2000 8:00 am Secretary of State DOCUMENT # N9700000507 THE FRIENDS OF THE VOLUSIA COUNTY LIBRARY CENTER 04-27-2000 90070 015 ****61.25 Principal Place of Business Mailing Address 105 EAST MAGNOLIA AVE. 105 EAST MAGNOLIA AVE. DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114-4423 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1969700 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Marcia Manthey Street Address (P.O. Box Number is Not Acceptable) O'SHAUGHNESSY, ELLEN 1210 GAMBLE PLACE 405 Pelican Bay Drive DAYTONA BEACH FL 32118 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. Signed in the absence of the President, as agent Ellen O'Shaughnessy Marcia Manthey, President 19 April 2000 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. President Manthey, Marcia ☐ Change ☐ Addition TITI F TITLE Delete O'SHAUGHNESSY, ELLEN NAME NAME 405 Pelican Bay Drive 1210 GAMBLE PL. STREET ADDRESS STREET ADDRESS DAYTONA BCH. FL 32118 CITY-ST-ZIP CITY-ST-7IP Daytona <u>Beach, FK 32119</u> ☐ Addition Vice President Change ☐ Delete TITLE TITLE MANTHEY, MARCIA NAME NAME Lempel, Lynn 92 FREMONT AVE. STREET ADDRESS STREET ADDRESS 1227 Golfview Drive DAYTONA BCH. FL 32114 CITY-ST-ZIP CITY-ST-ZIP Daytona Reach, FL 32114 Change ☐ Addition TITLE Treasurer TITLE □ Delete CLIFTON, MARIA M NAME Clifton, Maria M. STREET ADDRESS 90 Lenox Avenue NAME 90 LENOX AVE. STREET ADDRESS DAYTONA BCH. FL 32118 CITY-ST-ZIP Daytona B<u>each. FL 32118</u> CITY-ST-ZIF ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I 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 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. Maria M. Clifton, Treasurer (904) 252 6365