

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000507

FILED
Jan 14, 2009
Secretary of State

Entity Name: THE FRIENDS OF THE VOLUSIA COUNTY LIBRARY CENTER, INC.

Current Principal Place of Business:

105 EAST MAGNOLIA AVE.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

105 EAST MAGNOLIA AVE.
DAYTONA BEACH, FL 32114

New Mailing Address:

FEI Number: 59-1969700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANTHEY, MARCIA
405 PELICAN BAY DRIVE
DAYTONA BEACH, FL 32119 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: DP () Delete
Name: LEMPEL, LYNN
Address: 1227 GOLFVIEW DR
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DT () Delete
Name: MANTHEY, MARCIA
Address: 405 PELICAN BAY DR
City-St-Zip: DAYTONA BEACH, FL 32119

Title: DS () Delete
Name: SMITH, PHOEBE
Address: 1600 CRESCENT RIDGE RD
City-St-Zip: DAYTONA BEACH, FL 32118

Title: DV () Delete
Name: O'SHAUGHNESSY, ELLEN
Address: 1210 GAMBLE PL
City-St-Zip: DAYTONA BEACH, FL 32118

Title: DV (X) Delete
Name: RITZINGER, CAROL
Address: 1420 N ATLANTIC AVE 501
City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: O'SHAUGHNESSY, ELLEN
Address: 1210 GAMBLE PLACE
City-St-Zip: DAYTONA BEACH, FL 32118

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

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

Title: DV (X) Change () Addition
Name: RITZINGER, CAROL
Address: 1420 N. ATLANTIC #10
City-St-Zip: DAYTONA BEACH, FL 32118

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: MARICA MANTHLEY

DT

01/14/2009

Electronic Signature of Signing Officer or Director

Date