

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 760887 (0)
1. Corporation Name
FRIENDS OF THE BOYNTON BEACH CITY LIBRARY, INC.



Principal Place of Business Mailing Address
208 S SEACREST BLVD 208 S SEACREST BLVD
BOYNTON BCH FL 33435 BOYNTON BCH FL 33435

3. Date Incorporated or Qualified 12/03/1981 3a. Date of Last Report 05/01/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2276356	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
24	25	29	30

9. Name and Address of Current Registered Agent

REA, RAYMOND
120 E. BOYNTON BEACH BLVD.
W PALM BCH, FL
BOYNTON BEACH FL 33435

10. Name and Address of New Registered Agent

81 Name Virginia K. Farace
82 Street Address (P.O. Box Number is Not Acceptable) 208 S. Seacrest Blvd.
83
84 City Boynton Beach, FL 85 Zip Code 33435

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 *Virginia K. Farace* 4/2/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARMSTRONG, ELIZABETH	1.2 NAME	DS
STREET ADDRESS	4370 PINE TREE DR	1.3 STREET ADDRESS	CLERICO, MARY
CITY - ST - ZIP	BOYNTON BEACH FL	1.4 CITY - ST - ZIP	2008S. FEDERAL HWY. #C204
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	BOYNTON BEACH, FL 33435 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OPPENHEIMER, BOBBI	2.2 NAME	
STREET ADDRESS	62-C EASTGATE LANE	2.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	2.4 CITY - ST - ZIP	
TITLE	DP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELCH, BETTY A	3.2 NAME	
STREET ADDRESS	636 W OCEAN AVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	3.4 CITY - ST - ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JARDOT, MARGE	4.2 NAME	CONNIE SWENDSEEN
STREET ADDRESS	2135 NW 12TH STREET	4.3 STREET ADDRESS	10520 LIMEBERRY DR.
CITY - ST - ZIP	DELRAY BEACH FL	4.4 CITY - ST - ZIP	BOYNTON BEACH, FL 33436
TITLE	DT <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAUTENSCHLAGER, SANDRA	5.2 NAME	DT
STREET ADDRESS	335 SW 10TH AVE	5.3 STREET ADDRESS	JACK G. ARMSTRONG
CITY - ST - ZIP	BOYNTON BCH, FL 00000	5.4 CITY - ST - ZIP	4376 PINE TREE DR.
TITLE	DVP <input type="checkbox"/> DELETE	6.1 TITLE	BOYNTON BEACH, FL 33436 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHIEL, BENNI	6.2 NAME	
STREET ADDRESS	897 SUNDECK WAY	6.3 STREET ADDRESS	
CITY - ST - ZIP	BOYNTON BEACH FL	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Jack G. Armstrong* JACK G. ARMSTRONG 4/2/96 407-364-0609
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)

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1996 CORPORATION ANNUAL REPORT

FRIENDS OF THE BOYNTON BEACH CITY LIBRARY, INC.

Addendum to Box 13
Additional Directors

13.
Changes to Directors

D
PARADISI, DOROTHY
3653 QUAIL RIDGE DR.
BOYNTON BEACH, FL 33436

D
GORGAS, JANET
2818 S.W. 5TH STREET
BOYNTON BEACH, FL 33435

D
VIRGINIA DORBECKER
1707 BANYAN CREEK CT.
BOYNTON BEACH, FL 33436