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Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 700123 (3)

1. Corporation Name

WINTER PARK LIBRARY ASSOCIATION INC.

Principal Place of Business

Mailing Address

460 E NEW ENGLAND AVENUE  
WINTER PARK FL 32789460 E NEW ENGLAND AVENUE  
WINTER PARK FL 32789-44283. Date Incorporated or Qualified  
11/07/19593a. Date of Last Report  
03/06/19964. FEI Number  
59-0794396Applied For  
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

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25

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## 9. Name and Address of Current Registered Agent

## 10. Name and Address of New Registered Agent

MELANSON, ROBERT G.  
460 E. NEW ENGLAND AVE.  
WINTER PARK FL 32789

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 JOHN R. CASEBIER  
STREET ADDRESS 1300 LYNDALE BOULEVARD  
CITY-ST-ZIP WINTER PARK FL1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE VD ☒ DELETE  
NAME LOWNDES, RITA  
STREET ADDRESS 1308 GREEN COVE ROAD  
CITY-ST-ZIP WINTER PARK FL2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME VD  
2.3 STREET ADDRESS Thaddeus Seymour  
2.4 CITY-ST-ZIP 1350 College Point  
Winter Park FLTITLE SD ☐ DELETE  
NAME PAPPAS, JACQUELINE  
STREET ADDRESS 165 W. FAWSETT  
CITY-ST-ZIP WINTER PARK FL3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME SD  
3.3 STREET ADDRESS Jacqueline Pappas  
3.4 CITY-ST-ZIP 641 Bonita Drive  
Winter Park FLTITLE T ☒ DELETE  
NAME BARBARA DE VANE  
STREET ADDRESS 1035 LAKEVIEW  
CITY-ST-ZIP WINTER PARK FL4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME T  
4.3 STREET ADDRESS Daniel Coughlin  
4.4 CITY-ST-ZIP 980 Virginia Drive  
Winter Park FLTITLE D ☐ DELETE  
NAME MELANSON, ROBERT G.  
STREET ADDRESS 460 E. NEW ENGLAND  
CITY-ST-ZIP WINTER PARK FL5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 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: *Robert G. Melanson* Robert G. Melanson, Director

623-3490

CR2E037 (9/96)