

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746656

1. Entity Name

FRIENDS OF THE HUDSON LIBRARY, INC.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90032 015 ****61.25

Principal Place of Business

Mailing Address

8012 LIBRARY RD
HUDSON FL 34667

8012 LIBRARY RD
HUDSON FL 34667-6968

00000000

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1967069

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DELEHANTY, AILEEN B.
7831 NEW YORK AVE
HUDSON FL 34667

Name LORRAINE CORS

Street Address (P.O. Box Number is Not Acceptable)

8012 LIBRARY RD.

City HUDSON

FL

Zip Code 34667

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.

SIGNATURE LORRAINE CORS

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/8/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME DONBAR, BOB
STREET ADDRESS 7711 TYSON DR
CITY-ST-ZIP HUDSON FL

TITLE P ☒ Change ☐ Addition
NAME GERRY STARKEY
STREET ADDRESS 7632 NEW JERSEY AVE.
CITY-ST-ZIP HUDSON, FLA. 34667

TITLE VP ☐ Delete
NAME MELLINGER, HERB
STREET ADDRESS 10532 QUIMBY DR
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE D ☐ Change ☒ Addition
NAME CAROL LASHER
STREET ADDRESS 8944 S.R. 52
CITY-ST-ZIP HUDSON, FLA 34667

TITLE T ☐ Delete
NAME STAGLIANO, JO
STREET ADDRESS 1011 SURREY DR
CITY-ST-ZIP HUDSON FL

TITLE S ☐ Change ☒ Addition
NAME DENISE VANACORE
STREET ADDRESS 8012 LIBRARY RD.
CITY-ST-ZIP HUDSON, FLA. 34667

TITLE D ☐ Delete
NAME BURKE, LINDA
STREET ADDRESS 7229 HUDSON AVE
CITY-ST-ZIP HUDSON FL

TITLE D ☐ Change ☒ Addition
NAME KATHY RUSHE
STREET ADDRESS 7229 HUDSON AVE
CITY-ST-ZIP HUDSON, FLA. 34667

TITLE D ☐ Delete
NAME STARKEY, GERRY
STREET ADDRESS 7632 NEW JERSEY AVE
CITY-ST-ZIP HUDSON FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME VINCENT, JUDY
STREET ADDRESS 12021 ALTOONA AVE
CITY-ST-ZIP HUDSON FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/00

727-862-7682

Date

Daytime Phone #

CR2E037 (9/99)