

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744047

Entity Name: FRIENDS OF THE LEON COUNTY PUBLIC LIBRARY, INC.

Current Principal Place of Business:

200 WEST PARK AVENUE
TALLAHASSEE, FL 32301-7716

Current Mailing Address:

200 WEST PARK AVENUE
TALLAHASSEE, FL 32301-7716 US

FEI Number: 59-1896144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EVERS, MORGAN M
200 WEST PARK AVENUE
TALLAHASSEE, FL 32301-7716 US

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: MORGAN M EVERS

04/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name EVERS, MORGAN M
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301-7716

Title PRESIDENT
Name HARVEY, LISA
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301-7716

Title SECRETARY
Name FRANDSEN, LAURA
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301-7716

Title PRESIDENT-ELECT
Name HOWARD, BAILEY
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301-7716

Title CORRESPONDING SECRETARY
Name ORTEGA, ANA
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title ASSISTANT TREASURER
Name MOOD, KIRSTEN
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title PAST PRESIDENT
Name DEHART-GRIGAS, DALE-ANN
Address 200 WEST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301

I hereby 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 all other like empowered.

SIGNATURE: MORGAN M EVERS

**TREASURER AND
REGISTERED AGENT**

04/03/2023

Electronic Signature of Signing Officer/Director Detail

Date