2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2025
Secretary of State
9801092531CC

DOCUMENT# N09000009496

Entity Name: BRING ME A BOOK FORGOTTEN COAST, INC.

Current Principal Place of Business:

192 COACH WAGONER BLVD.
192 FOURTEENTH STREET
APALACHICOLA, FL 32320

Current Mailing Address:

P.O. BOX 160
APALACHICOLA, FL 32329

FEI Number: 27-1072506

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOLPE, ROBERT
119 S. MONROE STREET
STE 500
TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD
Name	WATTS, MICHAELIN REAMY
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	DIRECTOR
Name	WATTS, DAVID HENDERSON
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	DIRECTOR
Name	KIENZLE, CAROLINE
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	DIRECTOR
Name	ROWLAND, CHERYL
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	VPD
Name	MARSHALL, MARIE Q.
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	DIRECTOR
Name	BEAN, MASON J.
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

Title	DIRECTOR, TREASURER, SECRETARY
Name	BOTHWELL, SHANNON L
Address	P.O. BOX 160
City-State-Zip:	APALACHICOLA FL 32329

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: SHANNON BOTHWELL TREASURER 01/15/2025

Electronic Signature of Signing Officer/Director Detail — Date