

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000870

Entity Name: FRIENDS OF THE IMPERIAL POINT LIBRARY, INC.**Current Principal Place of Business:**5985 N FEDERAL HWY
FORT LAUDERDALE, FL 33308**Current Mailing Address:**5985 N FEDERAL HWY
FORT LAUDERDALE, FL 33308 US**FEI Number: 59-2214644****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**DEBORAH, O'CONNOR E
5985 N FEDERAL HWY
FORT LAUDERDALE, FL 33308 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	P
Name	O'CONNOR, DEBORAH E
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	VP
Name	DONICA , BALAMUT
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	TR
Name	ADLER, RONA M
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	S
Name	PETERS, BECKY D
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	MEM
Name	BETTERAL, ROBERT L
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

Title	MEM
Name	KANGLEY, GENE DR.
Address	5985 N FEDERAL HWY
City-State-Zip:	FORT LAUDERDALE FL 33308

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: DEBORAH E O'CONNOR**PRESIDENT****04/28/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date