2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002091

Entity Name: FRIENDS OF SOUTHWEST REGIONAL LIBRARY INC.

FILED
Apr 19, 2023
Secretary of State
6433462880CC

Current Principal Place of Business:

16835 SHERIDAN STREET PEMBROKE PINES. FL 33331

Current Mailing Address:

16835 SHERIDAN STREET PEMBROKE PINES. FL 33331 US

FEI Number: 47-4648091 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAUFFMANN, JOANNE L 16835 SHERIDAN STREET PEMBROKE PINES, FL 33331 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: JOANNE L. KAUFFMANN 04/19/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PRESIDENT/DIRECTOR	Title	TREASURER/DIRECTOR
Name	LEIGH, ROXANNE	Name	KAUFFMANN, JOANNE L
Address	16835 SHERIDAN STREET	Address	16835 SHERIDAN STREET
City-State-Zip:	PEMBROKE PINES FL 33331	City-State-Zip:	PEMBROKE PINES FL 33331

Title VICE PRESIDENT/DIRECTOR Title SECRETARY/DIRECTOR

Name SATIN, JUDI Name JOHNSON, NANCY

Address 16835 SHERIDAN STREET Address 16835 SHERIDAN STREET

City-State-Zip: PEMBROKE PINES FL 33331

City-State-Zip: PEMBROKE PINES FL 33331

Title DIRECTOR Title DIRECTOR

Name ROBLEDO, CAROLE Name SULLIVAN, JANICE

Address 16835 SHERIDAN STREET Address 16835 SHERIDAN STREET

City-State-Zip: PEMBROKE PINES FL 33331 City-State-Zip: PEMBROKE PINES FL 33331

Title DIRECTOR Title DIRECTOR

Name JOHNSON, JUANITA G

Address 16835 SHERIDAN STREET

Address 16835 SHERIDAN STREET

City/State-Zip: PEMBROKE PINES EL 33331

City-State-Zip: PEMBROKE PINES FL 33331 City-State-Zip: PEMBROKE PINES FL 33331

Continues on page 2

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: JOANNE LORETTA KAUFFMANN

TREASURER/DIRECTOR

04/19/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ZAVASH, DOLORES Name BEECHER, INES

Address 16835 SHERIDAN STREET Address 16835 SHERIDAN STREET

City-State-Zip: PEMBROKE PINES FL 33331

City-State-Zip: PEMBROKE PINES FL 33331