

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15028

**Entity Name:** FRIENDS OF THE A. F. KNOTTS PUBLIC LIBRARY, INC.**Current Principal Place of Business:**11 56TH ST.  
YANKEETOWN, FL 34498**Current Mailing Address:**P. O. BOX 11  
YANKEETOWN, FL 34498**FEI Number: 59-2677504****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CRAWLEY, LISA C  
11 56TH STREET  
YANKEETOWN, FL 34498 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: LISA C CRAWLEY****01/24/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, VP  
Name FINEOUT, DIANNE  
Address 12 62ND ST.  
City-State-Zip: YANKEETOWN FL 34498

Title DIRECTOR, PRESIDENT  
Name SAYWARD, ANN  
Address 39 MAGNOLIA AVE.  
City-State-Zip: YANKEETOWN FL 34498

Title D  
Name DOUST, BARBARA  
Address 267 E CASON BLVD  
City-State-Zip: INGLIS FL 34449

Title TREASURER  
Name CRAWLEY, LISA C  
Address PO BOX 155  
4815 RIVERSIDE DRIVE  
City-State-Zip: YANKEETOWON FL 34498

Title DIRECTOR  
Name BARBER, TIM  
Address 11 MASTODON DRIVE  
City-State-Zip: INGLIS FL 34449

Title DIRECTOR, SECRETARY  
Name FEENEY, ELEANOR  
Address 5907 RIVERSIDE DRIVE  
City-State-Zip: YANKEETOWN FL 34498

Title DIRECTOR  
Name PATE, MARY  
Address 5612 RIVERSIDE DRIVE  
City-State-Zip: YANKEETOWN FL 34498

*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: LISA C. CRAWLEY****TREASURER****01/24/2020**

Electronic Signature of Signing Officer/Director Detail

Date