

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16535

**Entity Name:** FRIENDS OF THE NAVARRE COMMUNITY LIBRARY, INC.

**Current Principal Place of Business:**

8484 JAMES M HARVELL RD  
NAVARRE, FL 32566-3204

**Current Mailing Address:**

8484 JAMES M HARVELL RD  
NAVARRE, FL 32566-3204 US

**FEI Number:** 59-3146677

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HENDERSON, MOREY M  
1686 WINDPOINTE COVE  
GULF BREEZE, FL 32563 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:** MOREY M HENDERSON

01/06/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |                 |                      |
|-----------------|---------------------|-----------------|----------------------|
| Title           | P                   | Title           | T                    |
| Name            | STEWART, PATRICIA G | Name            | HENDERSON, MOREY M   |
| Address         | 2236 KERRA LN       | Address         | 1686 WINDPOINTE      |
| City-State-Zip: | NAVARRE FL 32566    | City-State-Zip: | GULF BREEZE FL 32563 |

*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:** MOREY M HENDERSON

**TREASURER**

01/06/2025

Electronic Signature of Signing Officer/Director Detail

Date