

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38686

**FILED**  
**Feb 22, 2015**  
**Secretary of State**  
**CC1624277469**

**Entity Name:** FRIENDS OF THE ISLAND LIBRARY, INC.

**Current Principal Place of Business:**

5701 MARINA DRIVE  
HOLMES BEACH, FL 34217

**Current Mailing Address:**

5701 MARINA DRIVE  
HOLMES BEACH, FL 34217 US

**FEI Number: 51-0161681**

**Certificate of Status Desired: No**

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

WEBER, DAVID M  
406 BAY PALMS DRIVE  
HOLMES BEACH, FL 34217 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            PRES  
Name            SWAMY, MARY PAT  
Address        726 KEY ROYALE DRIVE  
City-State-Zip: HOLMES BEACH FL 34217

Title            VP  
Name            LECKIE, PAM  
Address        4255 GULF DRIVE, H-125  
City-State-Zip: HOLMES BEACH FL 34217

Title            SECR  
Name            JOHNSON, DENISE  
Address        530 77TH STREET  
City-State-Zip: BRADENTON FL 34209

Title            TRES  
Name            MCGANNON, VALERIE  
Address        6200 FLOTILLA DRIVE, UNIT 283  
City-State-Zip: HOLMES BEACH FL 34217

*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: MARY PAT SWAMY**

**PRESIDENT**

**02/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date