

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43419

FILED
Apr 15, 2016
Secretary of State
CC3900989450

Entity Name: JOHANN FUST LIBRARY FOUNDATION, INC.

Current Principal Place of Business:

1040 WEST 10TH STREET
BOCA GRANDE, FL 33921

Current Mailing Address:

P. O. BOX 309
BOCA GRANDE, FL 33921-0309 US

FEI Number: 59-0861994

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEDNERIK, JON C
3640 BAL HARBOR BOULEVARD
#435
PUNTA GORDA, FL 33950-8294 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: JON C. BEDNERIK

04/15/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BRYANT, HENRY I.
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title VP
Name EDGERTON, BARBARA
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title PRESIDENT
Name HOOPER, CANDICE SHY
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title ASST. TREASURER
Name SANGER, PETE
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name HOWELL, MARY L.
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name HAMMMOND, DAVIS
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name DEUPREE, BECKY
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name HALL, JR., JACK P.
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

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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: SUE FULLER

SECRETARY

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GHRISKEY, JR., BILL
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name MAJOR, LINDSAY
Address 1040 WEST 10TH STREET
City-State-Zip: BOCA GRANDE FL 33921

Title DIRECTOR
Name ROCKEFELLER, REGINA S. ESQ.
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title SECRETARY
Name FULLER, SUE
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309

Title DIRECTOR
Name MAY, LINDA
Address P. O. BOX 309
City-State-Zip: BOCA GRANDE FL 33921-0309