

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702784

FILED  
Mar 29, 2010  
Secretary of State

**Entity Name:** FRIENDS OF THE LIBRARY, INCORPORATED, IN ST. PETERSBURG AND PINELLAS COUNTY, FLORIDA

**Current Principal Place of Business:**

3745 9TH AVENUE, N  
ST, PETERSBURG, FL 33713 US

**New Principal Place of Business:**

**Current Mailing Address:**

3745 9TH AVENUE, N  
ST. PETERSBURG, FL 33713 US

**New Mailing Address:**

**FEI Number:** 59-6151880

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENT, DORRIS C  
10817 CLARA LANE  
SAINT PETERSBURG, FL 33708 US

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

CAFFERY, BETHIA VPD  
1019 JUNGLE AVE.  
SAINT PETERSBURG, FL 33710 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: BETHIA CAFFERY

03/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KENT, DORRIS C  
Address: 10817 CLARA LANE  
City-St-Zip: SAINT PETERSBURG, FL 33708 US

Title: VPD  
Name: CAFFERY, BETHIA  
Address: 1019 JUNGLE AVE  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

Title: SD  
Name: BELL, MOZELLE  
Address: 5215 DOVER ST NE  
City-St-Zip: SAINT PETERSBURG, FL 33703 US

Title: D  
Name: YOUNG, JUNE H  
Address: 362 89TH AVE. NE  
City-St-Zip: SAINT PETERSBURG, FL 33702 US

Title: D  
Name: WENZEL, JEANNETTE  
Address: 1036 43RD AVENUE N.  
City-St-Zip: SAINT PETERSBURG, FL 33703 US

Title: D  
Name: WUNDERLICH, RAY DR.  
Address: 8821 DR. MLK ST.N  
City-St-Zip: SAINT PETERSBURG, FL 33702 US

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: MOZELLE S. BELL

SD

03/29/2010

Electronic Signature of Signing Officer or Director

Date