

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703000

FILED
Jan 19, 2010
Secretary of State

Entity Name: FRIENDS OF THE ELSIE QUIRK PUBLIC LIBRARY OF ENGLEWOOD, INC.

Current Principal Place of Business:

100 W. DEARBORN ST.
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

100 W. DEARBORN ST.
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 59-2336166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLACSKY, BONNIE K
1111 SOUTH MCCALL ROAD
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

SMITH, NADINE M
1111 SOUTH MCCALL ROAD
ENGLEWOOD, FL 34223 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: NADINE M SMITH

01/19/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: CUTSINGER, RON
Address: 1225 MANASOTA BEACH ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: DT
Name: SMITH, NADINE
Address: 149 ALGIERS DRIVE
City-St-Zip: VENICE, FL 34293

Title: D
Name: ROBERTS, HENRY
Address: 7415 MANASOTA KEY ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: WILLIAMS, MARY JANE
Address: 3540 MONTEREY LANE
City-St-Zip: NORTH PORT, FL 34288

Title: D S
Name: RULLAN-ALBA, MIRIAM
Address: 428 LEMONWOOD DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: SARLES, LIZABETH
Address: 8 DOVER DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

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: NADINE M SMITH

TREA

01/19/2010

Electronic Signature of Signing Officer or Director

Date