

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703494

FILED
Apr 12, 2008
Secretary of State

Entity Name: FRIENDS OF EAST COUNTY REGIONAL LIBRARY INC.

Current Principal Place of Business:

881 GUNNERY RD
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

POBOX 256
LEHIGH ACRES, FL 33970

New Mailing Address:

FEI Number: 59-1319461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTELL, SANDRA
2252 10TH PLACE
LEHIGH ACRES, FL 33972 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MATHISEN, JAMES
Address: 881 GUNNERY ROAD
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP () Delete
Name: KRUL, CASMIR
Address: 881 GUNNERY ROAD
City-St-Zip: LEHIGH ACRES, FL 33971

Title: T () Delete
Name: BARTELL, DAVID
Address: 881 GUNNERY ROAD
City-St-Zip: LEHIGH ACRES, FL 33971

Title: S () Delete
Name: GROVE, CHARLOTTE
Address: 881 GUNNERY ROAD
City-St-Zip: LEHIGH ACRES, FL 33971

Title: COT () Delete
Name: BARTELL, SANDRA
Address: 2252 10TH PLACE
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SANDRA BARTELL

COT

04/12/2008

Electronic Signature of Signing Officer or Director

Date