

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90193 044 ****61.25

DOCUMENT # 707501

1. Entity Name

**FRIENDS OF ENGLEWOOD CHARLOTTE PUBLIC
LIBRARY, INC.**



Principal Place of Business

**3450 S MCCALL RD
ENGLEWOOD FL 34224
US**

Mailing Address

**3450 S MCCALL RD
ENGLEWOOD FL 34224
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7360657

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ARENA, MYRA E
299 ROTONDA CIR
ROTONDA WEST FL 33947**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Myra E Arena Myra E Arena Pres

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

02/09/06

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **HAVERLY, JACK**
CITY-ST-ZIP **32 SPORTSMAN CT.
ROTONDA WEST FL 33947**

TITLE ☐ Change ☒ Addition
NAME **Director**
STREET ADDRESS **Margaret Johnstone**
CITY-ST-ZIP **528 Boundary Blvd,
Rotonda West FL 33947**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **CLOWARD, PATTY**
CITY-ST-ZIP **7038 ROSEMONT DR
ENGLEWOOD FL 34224**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **ARENA, VICTOR**
CITY-ST-ZIP **299 ROTONDA CIRCLE
ROTONDA WEST FL 33947**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **SO**
STREET ADDRESS **BAY, JEAN**
CITY-ST-ZIP **231 BUNKER RD
ROTONDA WEST FL 33947**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **VPTD**
STREET ADDRESS **PRENTISS, GERRI**
CITY-ST-ZIP **193 FAIRWAY ROAD
ROTONDA WEST FL 33947**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **ARENA, MYRA E**
CITY-ST-ZIP **299 ROTONDA CIR
ROTONDA WEST FL 33947**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Myra E Arena Myra E Arena Pres 02/09/06 941 498 0214