

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

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90014 016 ****61.25

DOCUMENT # 707768

1. Entity Name

RUSKIN LIBRARY ASSOCIATION INC



Principal Place of Business

Mailing Address

% DOROTHY RENSHAW, TREAS
140 144 18TH STREET NW
RUSKIN FL 33570

140 % DOROTHY RENSHAW, TREAS
144 18TH STREET NW
RUSKIN FL 33570

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

59-6159383

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

SICKELS, VERA
534 S DOMINO DR
RUSKIN FL 33570

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

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

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

DATE

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

TITLE	PT	<input type="checkbox"/> Delete
NAME	SICKELS, VERA	
STREET ADDRESS	534 S DOMINO DR	
CITY-ST-ZIP	RUSKIN FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	COUNCIL, SANDY	
STREET ADDRESS	414 4TH ST., S. W.	
CITY-ST-ZIP	RUSKIN FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ADAIR, ANNE	
STREET ADDRESS	2246 GREENHAVEN DR	
CITY-ST-ZIP	SUN CITY CENTER FL	
TITLE	TT	<input type="checkbox"/> Delete
NAME	RENSHAW, DOROTHY	
STREET ADDRESS	140 18TH STREET NORTHWEST	
CITY-ST-ZIP	RUSKIN FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOCKER, BETTY	
STREET ADDRESS	1506 LAUGHTON PL	
CITY-ST-ZIP	SUN CITY CENTER FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	DUATO, SALLY	
STREET ADDRESS	1415 DEIRDRE DR	
CITY-ST-ZIP	RUSKIN FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Dorothy Renshaw Treasurer

2/1/06

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