

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710121

FILED
Apr 29, 2004
Secretary of State**Entity Name:** NEW COLLEGE LIBRARY ASSOCIATION, INC.**Current Principal Place of Business:**5700 N TAMIAMI TRAIL
LBR 207
SARASOTA, FL 34243 US**New Principal Place of Business:**5700 N TAMIAMI TRAIL
TKC
SARASOTA, FL 34243 US**Current Mailing Address:**5700 TAMIAMI TRAIL
LBR 207
SARASOTA, FL 34243 US**New Mailing Address:**5700 TAMIAMI TRAIL
TKC
SARASOTA, FL 34243 US**FEI Number:** 59-6165192**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SUMMERVILLE, JANE
5700 N TAMIAMI TR
LBR 207
SARASOTA, FL 34243 US**Name and Address of New Registered Agent:**SUMMERVILLE, JANE
5700 N TAMIAMI TR
TKC
SARASOTA, FL 34243 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: _____

04/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: SEIDER, TRACY
Address: 395 AVENIDA MILANO
City-St-Zip: SARASOTA, FL 34242Title: D () Delete
Name: WATSON, JOANNE
Address: 4846 KESTRAL PARK CIR.
City-St-Zip: SARASOTA, FL 34231Title: DT () Delete
Name: KENNEDY, LINDA
Address: 3937 WILSHIRE DR.
City-St-Zip: SARASOTA, FL 34238Title: DP () Delete
Name: HESS, DAVID R
Address: 1605 MAIN ST #1010
City-St-Zip: SARASOTA, FL 34236Title: DS () Delete
Name: GRIFFITH, KAREN
Address: 1351 N LAKE SHORE DR
City-St-Zip: SARASOTA, FL 34231Title: D () Delete
Name: GAYLOR, W E
Address: 901 RIDGEWOOD AVE
City-St-Zip: VENICE, FL 34292**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DT (X) Change () Addition
Name: BENEDICT, DEBBI
Address: 116 N.RIVER BLVD.
City-St-Zip: NOKOMIS, FL 34275Title: D (X) Change () Addition
Name: DUMBAUGH, BARBARA
Address: 3945 HAMILTON CLUB CIR.
City-St-Zip: SARASOTA, FL 34242Title: () 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 for the exemption stated in Section 119.07(3)(i), 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: DAVID R. HESS

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date