2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#717134

FILED Jun 08, 2009 Secretary of State

Entity Name: GULF BEACHES PUBLIC LIBRARY, INC. **Current Principal Place of Business: New Principal Place of Business:** 200 MUNICIPAL DRIVE LIBRARY BUILDING MADEIRA BEACH, FL 33708 **New Mailing Address: Current Mailing Address:** 200 MUNICIPAL DRIVE LIBRARY BUILDING MADEIRA BEACH, FL 33708 FEI Number: 59-1271151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMONS, J. NICK CINNELLA, MARGARET 200 MUNIĆIPAL DRIVE 16046 REDINGTON DRIVE MADEIRA BEACH, FL 33708 US REDINGTON BEACH, FL 33708 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: MARGARET CINNELLA 06/08/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TREA () Change () Addition () Delete JAGIELSKI, ROBERTA Name: Name: 17085 DOLPHIN DRIVE Address: Address: City-St-Zip: N. REDINGTON BEACH, FL 33708 City-St-Zip: Title: SEC () Delete Title: SEC (X) Change () Addition ATKINSON, HELEN Name: ATKINSON, HELEN Name: Address: 5-158TH AVENUE Address: 5 158TH AVENUE City-St-Zip: REDINGTON BEACH, FL 33708 City-St-Zip: REDINGTON BEACH, FL 33708 Title: VIC () Delete Title: () Change () Addition MILLAR, BARBARA Name: Name: 335 182ND AVENUE EAST Address: Address: City-St-Zip: REDINGTON SHORES, FL 33708 City-St-Zip: Title: Title: CHR () Change (X) Addition () Delete Name: Name: SIMONS, J. NICK 16046 REDINGTON DRIVE Address: Address: City-St-Zip: City-St-Zip: REDINGTON BEACH, FL 33708 Title: () Delete Title: () Change (X) Addition MARGARET, CINNELLA Name: Name: 200 MUNICIPAL DRIVE Address: Address: MADEIRA BEACH, FL 33708 City-St-Zip: 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: MARGARET CINNELLA DIR 06/08/2009