

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727783

FILED
Apr 01, 2009
Secretary of State

Entity Name: FRIENDS OF THE BLAKE LIBRARY IN STUART, INC.

Current Principal Place of Business:

2351 SE MONTEREY RD
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

2351 SE MONTEREY RD
STUART, FL 34994

New Mailing Address:

FEI Number: 59-6155142 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ODWAZNY, ERIN
2072 SE RIVERSIDE DRIVE
STUART, FL 34996 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: PP () Delete
Name: BASS, CONNIE
Address: 4185 SE ST.LUCIE BLVD
City-St-Zip: STUART, FL 34997

Title: S () Delete
Name: STECK, ANN
Address: 32 FIELDWAY DRIVE
City-St-Zip: STUART, FL 34996

Title: T () Delete
Name: DAVIE, ARTHUR J MR.
Address: 3067 SE DOUBLETON DRIVE
City-St-Zip: STUART, FL 34997

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:

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: ARTHUR J. DAVIE

T

04/01/2009

Electronic Signature of Signing Officer or Director

_____ Date