

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732143

FILED
Jan 28, 2009
Secretary of State

Entity Name: COOPER MEMORIAL LIBRARY ASSOCIATION, INC.

Current Principal Place of Business:

821 W MINNEIOLA AVE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

821 W MINNEIOLA AVE
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 59-0766725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, BONNIE
462 OSCEOLA ST
CLERMONT, FL 34711 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: PD () Delete
Name: RAY, BONNIE
Address: 462 OSCEOLA ST
City-St-Zip: CLERMONT, FL 34711

Title: T () Delete
Name: MCGUIRE, JOHN
Address: 463 CARROLL ST
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: DUPEE, ANN
Address: 389 DIVISION ST
City-St-Zip: CLERMONT, FL 34711

Title: TD () Delete
Name: MOHEREK, MARY T
Address: 11105 OLEANDER DR.
City-St-Zip: CLERMONT, FL 34711

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:

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: JOHN MCGUIRE

TREA

01/28/2009

Electronic Signature of Signing Officer or Director

Date