

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90011 003 ****61.25

DOCUMENT # 733460

1. Entity Name

FRIENDS OF THE COLUMBIA COUNTY PUBLIC
LIBRARY, INC.



Principal Place of Business

Mailing Address

308 NW COLUMBIA AVE
LAKE CITY FL 32055

308 NW COLUMBIA AVE
LAKE CITY FL 32055

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1647282

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

EVANS, KATRINA
308 NW COLUMBIA AVE
LAKE CITY FL 32055

Name *Deborah Paulson*

Street Address (P.O. Box Number is Not Acceptable)

308 N.W. Columbia Ave

City *Lake City*

FL

Zip Code *32065*

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

Deborah J Paulson

4/20/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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 ☐ Delete
NAME ROBINSON, DOLLY MARY N
STREET ADDRESS 392 NW OVERFLOW LAKE DR
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☐ Delete
NAME EUBANK, BONNIE
STREET ADDRESS 558 NW HARRIS LAKE DR
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☐ Delete
NAME SEARS, JUDY
STREET ADDRESS 493 SW ALAMO DR
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☒ Delete
NAME COLLINS, MARGARET
STREET ADDRESS 142 SW CRESCENT ST
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☒ Delete
NAME EVANS, KATRINA
STREET ADDRESS 308 NW COLUMBIA AVE
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☒ Change ☒ Addition
NAME *Sue Hadley*
STREET ADDRESS *495 N.W. Hillsboro*
CITY-STATE-ZIP *Lake City, FL 32055*

TITLE ☒ Change ☐ Addition
NAME *Deborah Paulson*
STREET ADDRESS *308 NW Columbia Ave.*
CITY-STATE-ZIP *Lake City, FL 32055*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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:

Deborah J Paulson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07

Date

386-758-1048

Daytime Phone #