

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735574

FILED
Apr 07, 2009
Secretary of State

Entity Name: FRIENDS OF THE WINTER HAVEN PUBLIC LIBRARY, INC.

Current Principal Place of Business:

335 AVENUE A N.W.
WINTER HAVEN, FL 338814604

New Principal Place of Business:

Current Mailing Address:

335 AVENUE A N.W.
WINTER HAVEN, FL 338814604

New Mailing Address:

FEI Number: 59-1712024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, JENNIFER A
335 AVENUE A N.W.
WINTER HAVEN, FL 33881 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: OWENS, JONATHAN
Address: 1158 INTERLACHAN BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: VPD () Delete
Name: PRATHER, JANINE
Address: 227 SANTA ROSA DR.
City-St-Zip: WINTER HAVEN, FL 33884

Title: SD () Delete
Name: ALLAN, HARVEY
Address: 411 FAGLER RD S.E.
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD () Delete
Name: RAGSDALE, ROSIE
Address: 2684 COUNTRY CLUB ROAD NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TD () Delete
Name: RINER, MARY
Address: P.O. BOX 593
City-St-Zip: LAKE HAMILTON, FL 33851

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:

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: MARY RINER

TD

04/07/2009

Electronic Signature of Signing Officer or Director

Date