

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **737848** (2)
1. Corporation Name
FRIENDS OF THE GULF GATE LIBRARY, INC.



Principal Place of Business: **7112 CURTISS AVE. SARASTOA FL 34231**
Mailing Address: **7112 CURTISS AVE. SARASTOA FL 34231**

3. Date Incorporated or Qualified: **01/17/1977**
3a. Date of Last Report: **02/03/1995**

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-1719248	Not Applicable
22	City & State	27	City & State	5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
	Zip	28	Country			<input type="checkbox"/> \$5.00 May Be Added to Fees
23	Country	29	Country	6.	Election Campaign Financing	<input type="checkbox"/>
24	Country	30	Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KEENEY, JIM D.
2070 RINGLING BLVD.
SARASOTA FL 34237**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	City
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD DOE, JACKIE 2433 YORSHIRE AVE SARASOTA FL	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1 2 NAME	
STREET ADDRESS		1 3 STREET ADDRESS	
CITY - ST - ZIP		1 4 CITY - ST - ZIP	
TITLE	SD MARINE, JANET 1817 BAYHOUSE CT. #220 SARASOTA FL	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2 2 NAME	
STREET ADDRESS		2 3 STREET ADDRESS	
CITY - ST - ZIP		2 4 CITY - ST - ZIP	
TITLE	PD CLARK, ROBERT D 7202 BOUNTY DRIVE SARASOTA FL	3 1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY - ST - ZIP		3 4 CITY - ST - ZIP	
TITLE	TD MARSHALL, A.E. 3825 TORREY PINES BLVD. SARASOTA FL	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY - ST - ZIP		4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

PD
MARCIA FREEMAN
3889 KINGSTON BLVD.
SARASOTA FL 34238

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *A.E. Marshall Jr.* **A.E. MARSHALL JR.** *PWB, 14/1996* **PWB, 14/1996** *(940)* **924-2213**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)