

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737930

FILED  
Apr 27, 2007  
Secretary of State

**Entity Name:** FRIENDS OF THE MILTON PUBLIC LIBRARY, INC.

**Current Principal Place of Business:**

5541 ALABAMA ST  
MILTON, FL 32570

**New Principal Place of Business:**

**Current Mailing Address:**

5541 ALABAMA ST  
MILTON, FL 32570

**New Mailing Address:**

**FEI Number:** 20-3441321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TOIFEL, PEGGY  
6029 PLAYERS PLACE  
MILTON, FL 32570 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: FRANCE, NOEL  
Address: 5773 HERMITAGE CIR  
City-St-Zip: MILTON, FL 32570

Title: VPD ( ) Delete  
Name: COOK, GLORIA  
Address: P O BOX 160 - OAK STREET  
City-St-Zip: BAGDAD, FL 32530

Title: S ( ) Delete  
Name: BAILEY, BARBARA  
Address: 6262 COTTAGE WOODS DR  
City-St-Zip: MILTON, FL 32570

Title: T ( ) Delete  
Name: TOIFEL, PEGGY  
Address: 6029 PLAYERS PLACE  
City-St-Zip: MILTON, FL 32570

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: TOIFEL, PEGGY  
Address: 6039 PLAYERS PLACE  
City-St-Zip: MILTON, FL 32570

Title: VPD (X) Change ( ) Addition  
Name: MCLENDON, JOAN  
Address: 5249 MORGAN RIDGE RD  
City-St-Zip: MILTON, FL 32570

Title: S (X) Change ( ) Addition  
Name: MCCARTHY, DIANA  
Address: 6177 MEURSALT ROAD  
City-St-Zip: MILTON, FL 32570

Title: T (X) Change ( ) Addition  
Name: KIGER, BONNIE  
Address: 6120 BANDAL COURT  
City-St-Zip: MILTON, FL 32570

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: PEGGY TOIFEL

P

04/27/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date