

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737930

FILED
Mar 20, 2009
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:

P. O. BOX 4242
MILTON, FL 32572

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:

DUBOIS, MITZI L
4982 CREEKSIDE LANE
MILTON, FL 32570 US

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: MITZI L. DUBOIS

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

Title: S (X) Delete
Name: DUBOIS, MITZI
Address: 4982 CRK SIDE LN
City-St-Zip: MILTON, FL 32570

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUBOIS, WILLIAM L
Address: 4982 CREEKSIDE LANE
City-St-Zip: MILTON, FL 32570

Title: VP (X) Change () Addition
Name: BROWN, BERT
Address: 5724 CHARLENE
City-St-Zip: MILTON, FL 32583

Title: S (X) Change () Addition
Name: COOK, GLORIA
Address: P. O. BOX 160
City-St-Zip: BAGDAD, FL 32530

Title: T (X) Change () Addition
Name: DUBOIS, MITZI L
Address: 4982 CREEKSIDE LANE
City-St-Zip: MILTON, FL 32570

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: MITZI L. DUBOIS

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date