

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 739862**

1. Entity Name

RIENDS LIBRARY OF PUNTA GORDA, INC.**FILED**
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90024 016 ****61.25

0047230

Principal Place of Business

Mailing Address

**24 W. HENRY ST.
PUNTA GORDA FL 33950****424 W. HENRY ST.
PUNTA GORDA FL 33950**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1787924

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****MCDONALD, BETTY
801 MONACO DRIVE
PUNTA GORDA FL 33950**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	PD	☒ Delete
NAME	EWELL, JACK	
STREET ADDRESS	3800 BAL HARBOR BLVD. #311	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	VPD	☒ Delete
NAME	GEORGE, SHIRLEY	
STREET ADDRESS	690 CORONADO DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	T	☒ Delete
NAME	CRASSWELLER, JAMES	
STREET ADDRESS	751 MONACO DR	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	SD	☒ Delete
NAME	STREET, VERNA	
STREET ADDRESS	4916 ALMAR DR.	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☐ Change ☒ Addition
NAME	John Dauster	
STREET ADDRESS	131 Hibiscus	
CITY-ST-ZIP	Punta Gorda FL 33950	
TITLE	VP	☐ Change ☒ Addition
NAME	Maureen Zapke	
STREET ADDRESS	P.O. Box 510958	
CITY-ST-ZIP	Punta Gorda FL 33950	
TITLE	TD	☐ Change ☒ Addition
NAME	margaret A. Nederveld	
STREET ADDRESS	1640 Atares Dr #15	
CITY-ST-ZIP	Punta Gorda FL 33950	
TITLE	SD	☐ Change ☒ Addition
NAME	Peggy Horstman	
STREET ADDRESS	1215 Appian Way	
CITY-ST-ZIP	Punta Gorda FL 33950	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Margaret A. Nederveld*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-02

941-639-3580

Date

Daytime Phone #

CR2E037 (9/01)