

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744047

FILED  
Jul 15, 2008  
Secretary of State

Entity Name: FRIENDS OF THE LEON COUNTY PUBLIC LIBRARY, INC.

**Current Principal Place of Business:**

200 WEST PARK AVENUE  
TALLAHASSEE, FL 323017716

**New Principal Place of Business:**

**Current Mailing Address:**

200 WEST PARK AVENUE  
TALLAHASSEE, FL 323017716

**New Mailing Address:**

FEI Number: 59-1896144      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROGERS, LAURA K  
1741 MARSTON PLACE  
TALLAHASSEE, FL 32308      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: T      ( ) Delete  
Name: ROGERS, LAURA  
Address: 1741 MARSON PLACE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: AT      ( ) Delete  
Name: MEROS, KIM  
Address: 288 E. ROSEHILL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: S      ( ) Delete  
Name: HOWARD, RASHADA JAI  
Address: 2508 GOLDEN PARK LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: P      (X) Delete  
Name: MCKINNEY-WILLIAMS, OPAL  
Address: 1201 STONEY CREEK WAY  
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP      ( ) Delete  
Name: WRIGHT, KATHLEEN  
Address: 1756 FOLKSTONE RD  
City-St-Zip: TALLAHASSEE, FL 32312

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP      (X) Change ( ) Addition  
Name: HOWARD, RASHADA JAI  
Address: 2508 GOLDEN PARK LANE  
City-St-Zip: TALLAHASSEE, FL 32309

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P      (X) Change ( ) Addition  
Name: WRIGHT, KATHLEEN  
Address: 1756 FOLKSTONE RD  
City-St-Zip: TALLAHASSEE, FL 32312

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: LAURA K. ROGERS

T

07/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date