FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 749397

(6)

FRIENDS OF THE LARGO LIBRARY, INC.

FRIENUS OF THE LANGO LIBRARY, INC.								
Principal Plac	e of Business	Mailing Addr	ess				OOL OIBIL OHOIF OLOH OLOH	OTEN OTEN (BO)
351 EAST BAY DRIVE LARGO FL 34640		351 EAST BAY DRIVE LARGO FL 34640						
						3. Date Incorporated or Qualified 10/18/1979	3a. Date of Last 03/23/19	
2. Principal F	Place of Business	2a. Mailing A	ddress			4. FEI Number 59-2386991		Applied For Not Applicable
Suite, Apt	. #, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired		Additional Required
City & Sta	te	City & Sta	ate		·	Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees
Zip	Country	Zıp		Country	•	8. This corporation has liability for in		199.032,
24	25	29		30			Yes No	
	9. Name and Address of Curre	ent Registered Age	ent	, В1	Name	10. Name and Address of New Re	gistered Agent	
DECAD	EV IOUN ATTORNEY AT LAW			"				
PECAREK, JOHN, ATTORNEY AT LAW 200 CLEARWATER-LARGO ROAD SW				82	82 Street Address (P.O. Box Number is Not Acceptable)			
LARGO FL 34640			83					
				84	City		FL 85 Zip	p Code
or registe	to the provisions of Sections 617.050 ared agent, or both, in the State of Flo with, and accept the obligations of, Se	xida. Such change v	as authorized	the above-r by the corp	named corpo oration's boa	oration submits this statement for the purp ard of directors. I hereby accept the appoi	ose of changing its r ntment as registered	agistered office agent. I am
	Signature, typed or printed name of registered age		(NOTE		it signature requir	red when reinstating)	DATE	
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	P WILLIAM MUDTIC		DELETE	11 TITLE			☐ Change	☐ Addition
NAME OFFICE ADDRESS	WILKINS, MYRTLE 2465 KEENE BLVD. DR.			12 NAME				
STREET ADOPESS	LARGO, FL 00000 34643			1 3 STREET				
CITY-ST-ZIP TITLE	V		DELETE	14 CITY - S	il - ZIP		Change	Addition
NAME	STEVENS, RENA			22 NAME			onlinge	
STREET ADDRESS	444 LADY DD 4344			2 3 STREET	ADDRESS			
CITY - ST - ZIP	LARGO FL 34648			2 4 CITY-1	ST-ZIP			
TITLE			DELETE	3 1 TITLE			Change	Addition
NAME	BIRKHOLZ, GERDA			3.2 NAME				
S'REET ADORESS	1			3 3 STREET	ADDRESS			
CITY-ST-ZIP	LARGO FL 34640		DC: CTC	3.4. CITY - :	ST-ZIP		F-1.5	
TITLE NAME	AT PORTER, KATHRYN	L	DEFELE	4 1 TITLE			Change	☐ Addition
STREET ADDRESS	000 3711 4157 4114			4 2 NAME 4 3 STREET	Annaecc			
CITY-ST-ZIP	LARGO FL 34640			4.4 CHTY - 9				
TITLE	RS		DELETE	51 TITLE	11 - ZIF		Change	Addition
NAME				52 NAME				
STREET ADORESS	2000 E BAY DR. 787 191	tia Gulf	DLVD	5 3 STREET	ADDRESS			
CITY-ST-ZIP	BURGESS, RUTH 2000 F BAY DR FOT 194 LARGO FL SHOHT 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NROCKS 1	BCH	5.4 CITY - 9	IT - ZIP			
TITLE		t135 □	DELETE	6 1 THTLE			☐ Change	Addition
NAME	DONALDSON, EMILY	. ••		62 NAME				
STREET ADDRESS	105 HARBOR VIEW LANE			63 STREET	ADDRESS			
CITY - ST - ZIP	LARGO FL 34640			6.4 CITY-5				
certify the	at the information indidated on this an	nual report or supple	miental annual	report is tru	ie and accur	for the exemption stated in Section 119.0 rate and that my signature shall have the shis report as required by Chapter 617, Floring 1	ame legal effect as if	made under

SIGNATURE:

IGNATURE AND TYPED OF PRINTED NAME C

IGNING OFFICER OF DIRECTOR

813-585,9370