2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2001 8:00 am
Secretary of State
01-27-2001 90064 047 ****61.25

DOCUMENT # 752434

1. Entity Name

FRIENDS OF THE LIBRARIES OF PALM BAY, INC.

Principal Place of Business	Mailing Address
1520 PORT MALABAR BLVD. NE. PO BOX 931 PALM BAY FL 32906	1520 PORT MALABAR BLVD. NE. PO BOX 931 PALM BAY FL 32906

DO NOT WRITE IN THIS SPACE

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 59-2172600 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PORTNOWITZ, PATRICIA 1520 PORT MALABAR BLVD NE. PALM BAY, FL FL 32905	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 $61.25	9. 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ~~LINNEN, KAREN~~ ~~1572 WALDORF CIR NE~~ ~~PALM BAY FL 32905~~	☒ Delete	1st V. Pres. Norma Williams 998 Briarwood Blvd. NE Palm Bay, fl 32905	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD President GAST, EVELYN 1646 DAWES ROAD NE PALM BAY FL 32905	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Corr. Secy COYNE, JEAN 805 TETLOW CT NE PALM BAY FL 32905	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Treasurer ROLLINS, JOHN 4680-3 LAKE WATERFORD WAY MELBOURNE FL 32901	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Recording Secy HEITSCH, KIM 1755 PLANTATION CIR SE PALM BAY FL 32909	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD 2nd VP SENTNER, FRAN 1664 SUNNYBROOK LN, K-203, NE PALM BAY FL 32905	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Evelyn Gast SIGNATURE Evelyn Gast 1/11/01 321/676-5825
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #