2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2005 8:00 am
Secretary of State
03-15-2005 90022 020 ****61.25

DOCUMENT # 753734

1. Entity Name

FRIENDS OF THE PALM BEACH COUNTY PUBLIC LIBRARY, INC.

Principal Place of Business	Mailing Address
3650 SUMMIT BLVD. WEST PALM BEACH FL 33406	3650 SUMMIT BLVD. WEST PALM BEACH FL 33406

1st MOORE CR2E037 (10/04)

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 59-2038524 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BROWNLEE, JERRY W. MR.
3650 SUMMIT BLVD.
WEST PALM BEACH FL 33406

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MALONE, JUANITA J 2524 STONEGATE DR. WELLINGTON FL 33414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Jan Wilkins OAK 11904 Myrtle Court Palm Beach Gardens, FL 33410
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MICKELSON, LOIS 618 PARKWAY COURT GREENACRES FL 33413	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Manfred Junker 8399 Foglia Circle Boynton Beach, FL 33437
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KRASNOW, ROSALIE M. 7378 PINE FORREST CIR LAKE WORTH FL 33467	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Trudy Junker (same as above)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BELL, BETTY B 467 CAPISTRANO DRIVE PALM BEACH GARDENS FL 33410	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Sandra Aronson 72 King Fisher Way Boynton Beach, FL 33436
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BECAK, THALIA 4717 RAINBOW DR GREENACRES FL 33463	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Eileen Rothman 7900 Dorchester Rd. 33437 Boynton Beach, FL
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HEBERT, SIMONE 3529 CHEETHAM HILL BLVD WEST PALM BEACH FL 33470	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Joyce Smith 13109 Meadowbreeze Dr. Wellington, FL 33414

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: Simone Hebert, Treasurer 3-11-05 561-795-6901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #