2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Sep 07, 2006 8:00 am Secretary of State DOCUMENT # 753734 09-07-2006 90013 005 ****70.00 FRIENDS OF THE PALM BEACH COUNTY PUBLIC LIBRARY, INC. Principal Place of Business Mailing Address 3650 SUMMITBLVD 3650 SUMMTELVD WEST PALMBEACH, FL. 33406 WEST PALMEREACH, FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07032006 Chg-NP CR2E037 (4/06) 4. FEI Number - 59-2038524 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BROWNLEE, JERRY W. MR. ah Street Address (P.O. Box Number is Not Acceptable) 3650 SUMMIT BLVD. WEST PALM BEACH, FL 33406 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. M SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature yped or printed na ne of registered agent and title if applicable DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by September 6, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Treasurer D Change TITLE ☐ Delete TITLE Sandra ☐ Addition Aronson MALONE, JUÁNITA J NAME NAME 12 King Fisher Dey STREET ADDRESS 2524 STONEGATE DR. STREET ADDRESS Pluch Fla 33436 Vice President Dehar CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP D ☐ Delete TITLE Eileen Rothman 1900 Borchester Rd MICKELSON, LOIS NAME STREET ADDRESS 618 PARKWAY COURT STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33413 CITY-ST-ZIP Delete , TITÍ F TITLE ☐ Change Addition KRASNOW, ROSALIE M. NAME NAME Trudy Junker STREET ADDRESS 7378 PINE FORREST CIR STREET ADDRESS 8399 Logia Dr. Bounton Beach CITY-ST-ZIP LAKE WORTH, FL 33467 CITY-ST-ZIP T1. 33 ¥37 ☐ Delete TITLE ☐ Change ☐ Addition BELL, BETTY B STREET ADDRESS **467 CAPISTRANO DRIVE** STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 CITY-ST-ZIP VPD Delete TITLE TITLE Change ☐ Addition **BECAK, THALIA** NAME NAME 4717 RAINBOW DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33463 CITY-ST-ZIP ☐ Change ☐ Addition HEBERT, SIMONE NAME NAME STREET ADDRESS 3529 CHEETHAM HILL BLVD STREET ADDRESS CITY-ST-7IP WEST PALM BEACH, FL 33470 CITY ST. 7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13/2006 (561) 642-6540

FILED