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May 06 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 756623 (5)

1. Corporation Name

THE MELROSE LIBRARY ASSOCIATION, INC.



Principal Place of Business

Mailing Address

312 WYNWOOD
MELROSE FL 32666
US

PO BOX 54
MELROSE FL 32666-0054
US

3. Date Incorporated or Qualified
03/04/1981

3a. Date of Last Report
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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4. FEI Number
58-9128802

Applied For
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARTLETT, CHARLES H
RR2 BOX 212CC
ROUTE 21
HAWTHORNE FL 32640

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Charles H. Bartlett

Charles H. Bartlett

1/24/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME MEYER, HARVEY
STREET ADDRESS 8146 ALDERMAN RD
CITY-ST-ZIP MELROSE FL

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME Pat Bonsteel
1.3 STREET ADDRESS 3051 S.E. State Rd 21 Unit 7
1.4 CITY-ST-ZIP Melrose, FL 32666

TITLE T ☐ DELETE
NAME BARTLETT, CHARLES H
STREET ADDRESS RR2 BOX 212CC 125 Quail Lane
CITY-ST-ZIP HAWTHORNE FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Warren, Kathi
2.3 STREET ADDRESS Box 26 500 Grove St
2.4 CITY-ST-ZIP Melrose, FL 32666

TITLE S ☒ DELETE
NAME GEISEL, JEAN
STREET ADDRESS RR2 BOX 2047 N/A 6221 Dogwood Lane
CITY-ST-ZIP MELROSE FL

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME Giesel, Jean S
3.3 STREET ADDRESS 6221 Dogwood Lane
3.4 CITY-ST-ZIP Melrose, FL 32666

TITLE P ☒ DELETE
NAME CARR, JANET A
STREET ADDRESS 743 SEMINOLE RIDGE RD
CITY-ST-ZIP MELROSE FL

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME Stevens, Betty D
4.3 STREET ADDRESS 23212 N.E. 69th Ave
4.4 CITY-ST-ZIP Melrose, FL 32666

TITLE D ☒ DELETE
NAME CASH, HELEN
STREET ADDRESS 1594 NW 19TH CIRCLE
CITY-ST-ZIP GAINESVILLE FL

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME Renzelman, Peggy D
5.3 STREET ADDRESS RR2 Box 384 6101 N. 255th St.
5.4 CITY-ST-ZIP Melrose, FL 32666

TITLE P ☒ DELETE
NAME WARREN, KATHI
STREET ADDRESS P.O. BOX 26 (NA)
CITY-ST-ZIP MELROSE FL

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME Elliott, Anna
6.3 STREET ADDRESS RR2 Box 384 6101 N. 255th St.
6.4 CITY-ST-ZIP Melrose, FL 32666

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)