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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 760887 (0)

1. Corporation Name

FRIENDS OF THE BOYNTON BEACH CITY LIBRARY, INC.



Principal Place of Business: 208 S SEACREST BLVD BOYNTON BCH FL 33435; Mailing Address: 208 S SEACREST BLVD BOYNTON BCH FL 33435-4452

3. Date incorporated or Qualified: 12/03/1981; 3a. Date of Last Report: 04/10/1996

2. Principal Place of Business; 2a. Mailing Address; 4. FEI Number: 59-2276356; 5. Certificate of Status Desired; 6. Election Campaign Financing; 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes.

9. Name and Address of Current Registered Agent: VIRGINIA K. FARACE, 208 S. SEACREST BLVD., BOYNTON BEACH FL 33435; 10. Name and Address of New Registered Agent; 81 Name; 82 Street Address; 83; 84 City; 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: 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. Includes entries for DS CLERICO, MARY; D OPPENHEIMER, BOBBI; DP WELCH, BETTY A; D CONNIE SWENDSEEN; DT JACK G. ARMSTRONG; DVP SHIEL, BENNI.

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.

SIGNATURE: [Signature] 4/1/97 561-364-0609; SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR; Date; Daytime Phone # 0042318

CR2E037 (9/96)