2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767836

FILED Jan 05, 2008 Secretary of State

Entity Name: FRIENDS OF THE LIBRARY OF HERNANDO COUNTY, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 238 HOWELL AVE BROOKSVILLE, FL 34601 **Current Mailing Address: New Mailing Address:** 238 HOWELL AVE BROOKSVILLE, FL 34601 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARENT, DEBORAH CUNNINGHAM, MARY J 6391 EVARO AVE 14448 TAMARIND LOOP SPRING HILL, FL 34608 US BROOKSVILLE, FL 34609 US 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: MARY J. CUNNINGHAM 01/05/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GERNTIENS, ELIZABETH Name: Name: 2320 ARDENWOOD DR Address: Address: City-St-Zip: SPRING HILL, FL 34609 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCMAHON, CLAIRE Name: Address: 2074 QUAILWOOD LANE Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: Title: () Delete Title: (X) Change () Addition PARENT, DEBORAH Name: CUNNINGHAM, MARY J Name: 6391 EVARO AVE 14448 TAMARIND LOOP Address: Address: City-St-Zip: SPRING HILL, FL City-St-Zip: BROOKSVILLE, FL 34609 Title: SD () Delete Title: () Change () Addition DEPEW, ELIZABETH Name: Name: Address: 2434 WORTHINGTON CT Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: Title: () Delete Title: (X) Change () Addition COCCI, LOUISE BATTISTRADA, HELEN Name: Name: 7522 ST ANDREWS BLVD 10355 WOODLAND WATERS BLVD Address: Address: City-St-Zip: WEEKIWACHEE, FL 34613 City-St-Zip: BROOKSVILLE, FL 34613 Title: (X) Delete Title: () Change () Addition O'HARE, ALICE Name: Name: Address: 7385 CRESTWOOD DR Address: BROOKSVILLE, FL 34613 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY J. CUNNINGHAM T 01/05/2008