

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90115 003 ****61.25

DOCUMENT # N00000007569

1. Entity Name

**THE FRIENDS OF THE NORTH COUNTY PUBLIC
LIBRARY, INC.**



Principal Place of Business
**2315 MCCLELLAN PKWY
SARASOTA FL 34239**

Mailing Address
**2315 MCCLELLAN PKWY
SARASOTA FL 34239**

24044030



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1038788

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANIER, PATTIE
2315 MCCLELLAN PKWY
SARASOTA FL 34239**

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

Pattie Lanier

04-06-04

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, 2004**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
CAMPBELL, CELESTINE
3526 PRADO DRIVE
SARASOTA FL 34235 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BESLEY, GLORIA
8803 MANOR LOOP #201
BRADENTON FL 34202 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LANIER, PATTIE
2315 MCCLELLAN PKWY
SARASOTA FL 34239 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCCULLOUGH, NATHALIE
378 GOLDEN GATE PT. #2
SARASOTA FL 34236 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MILLS, LAURA
4517 ASCOT CIRCLE S.
SARASOTA FL 34235 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
HODGES, PAULINE
1159 FOUR SEASONS CIRCLE
SARASOTA FL 34234 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
David Fultz
4815 Jacaranda Heights Dr
Venice FL 34293 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Dee Webber
4933 Rutland Gate
Sarasota FL 34234 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Loretta Harper
3761 Glen Oaks Manor Dr
Sarasota FL 34232 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Pattie Lanier

Pattie Lanier

04.06.04

941/955-9623

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #