PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
[redacted]
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JAN -3 PM 3:23

DOCUMENT # N 00000007569

1. Corporation Name
The Friends of the North County Public Library, Inc.

REINSTATEMENT 02-03

05-24-02 91345 002 $61.25

2. Principal Office Address	**3.** Mailing Office Address
2315 McClellan Pkwy	2315 McClellan Pkwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sarasota, FL	City & State: Sarasota FL
Zip: 34239 Country: Sarasota	Zip: 34239 Country: Sarasota

4. Date Incorporated or Qualified To Do Business in Florida 11/13/2000

5. FEI Number 65-1038788 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Pattie Lanier
600009530206
12/17/02--01011--001 **183.75

Street Address (P.O. Box Number is Not Acceptable): 2315 McClellan Pkwy

Suite, Apt. #, Etc.:

City: Sarasota | State: FL | Zip Code: 34239

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Pattie Lanier
REGISTERED AGENT MUST SIGN

Date: 12-10-02

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Pauline Hodges (D)	1159 Four Seasons Cir	Sarasota FL 34234
VP	Celestine Campell (D)	3526 Prado Dr	Sarasota FL 34235
Sec	Laura Mills (D)	4517 Ascot Cir S	Sarasota FL 34235
D	Pattie Lanier	2315 McClellan Pkwy	Sarasota FL 34239
D	Nathalie McCullough	378 Golden Gate Pt # 2	Sarasota FL 34236
D	Gloria Besley	8803 Manor Loop #201	Bradenton FL 34202

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Pauline Hodges President 12/10/02 941-361-6985
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: The Friends of the North County Public Library, Inc.

2. The principal office address: _____

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/13/2000 Document number: N00000007569

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Weisner, Ira Stewart

1800 Second Street, Suite 870

Sarasota, FL 34236

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Pattie Lanier

2315 McClellan Pkwy
(P.O. Box or personal mailbox NOT acceptable)

Sarasota, FL 34239

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Pauline Hodges — Pauline Hodges, President
(Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Pattie Lanier — _____
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Pattie Lanier — Treasurer
(Typed or Printed Name) (Capacity)

*** * * FILING FEE: $35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314