## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 30, 2006 8:00 am Secretary of State

DOCUMENT # N0000008425  1. Entity Name FRIENDS OF THE PACE AREA LIBRARY, INC.					01-30-2006 90052 009 ****61.25			
PO BOX 2068 PO		Mailing Address PO BOX 2068 PACE, FL 32571		1		·.		
Principal Place of Business     3. M.		. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01112006 CH	ng-NP	CR2E037 (11/05)		
City & State		City & State		4. FEI Number 59-356225	8	<del></del>	plied For Applicable	
Zip Country		Zip	Zip Cour		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current Reg	istered Agent			7. Name and Add	ress of New Re	gistered Agent	
STEWART	DANIEL	÷		Name			-	_
3895 HWY PACE, FL	. 90			Street Address (P.O. Box Number is Not Acceptable)				
				City			Zip Code	9
8. The above named entity submits this statement for the purpose of changing its register.							FL	
	named entity submits this statement for the ions of registered agent.	e purpose of changing its r	registere	ed office or registe	red agent, or both, in	the State of Flor	rida. I am familiar with,	and accept
SIGNATURE(	Signature, typed or printed name of registered agent and t	tte if applicable. (NOTE:	: Registered	d Agent signature requires	d when reinstating)	/-0	1606 DATE	<del></del>
			Campaign Financing \$5.00 May Be added to Fees				ike check payable to da Department of St	
10.	OFFICERS AND DIREC	TORS	11.		ADDITIONS/CHANG	FS TO OFFICER	S AND DIRECTORS IN	10
TITLE	V	□ Delete	TITLE	<del></del>	ADDITIONS/CHANG	LO TO OFFICER	Change	Addition
NAME .	TWARKINS, TOM	CT Descre	NAMI				Ci citalige	ADDITION
STREET ADDRESS	4932 WOODBINE RD.			ET ADDRESS				
CITY-ST-ZIP	PACE, FL 32571		CITY	-ST-ZIP				
TITLE	Р	☐ Delete	TITLE				☐ Change	Addition
NAME	LYLE, MARTHA		NAMI	E				
STREET ADDRESS	4101 BAY FRONT TERRACE		STRE	ET ADDRESS				
CITY-ST-ZIP	PACE, FL 32571		CITY	-ST-ZIP				
TITLE	В	☐ Delete	TITLE	:			☐ Change	☐ Addition
NAME	CRAGO, TERRY		NAMI	E				
STREET ADDRESS	5300 ROWE TRAIL			ET ADDRESS				
CITY-ST-ZIP	PACE, FL 32571		CITY	-ST-ZIP				
TITLE	Т	☐ Delete	TITLE				☐ Change	Addition
NAME								
	CRAGO, RALPH		NAMI					
STREET ADDRESS	5300 ROWE TRAIL		STRE	ET ADDRESS				
CITY-ST-ZIP	5300 ROWE TRAIL PACE, FL 32571		STRE	ET ADORESS -ST-ZIP				
CITY-ST-ZIP TITLE	5300 ROWE TRAIL PACE, FL 32571 S	☐ Delete	STRE CITY TITLE	ET ADDRESS -ST-ZIP	· »t		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN		STRE CITY TITLE NAME	ET ADORESS -ST-ZIP	· •		☐ Change	☐ Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN 4932 WOODBINE RD.		STRE CITY TITLE NAMI STRE	et address -St-zip : : : E	,		☐ Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN 4932 WOODBINE RD. PACE, FL 32571	☐ Delete	STRE CITY TITLE NAMI STRE CITY	ET ADDRESS  ET ADDRESS  -ST-ZIP  E  -ST-ZIP	ð			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN 4932 WOODBINE RD. PACE, FL 32571 B		STRE CITY TITLE NAMI STRE CITY	ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  (4/4)		.,	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN 4932 WOODBINE RD. PACE, FL 32571	☐ Delete	STRE CITY TITLE NAMI STRE CITY	ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  (4/4)		v, maky:	☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	5300 ROWE TRAIL PACE, FL 32571 S TWARKINS, FERRYN 4932 WOODBINE RD. PACE, FL 32571 B MCDANIEL, KIM	☐ Delete	STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP	B ARRINGTO 275 (081 ACE, FL	V, MARYON 3LESTON 2257	□ Change	

Inereoy certify that the information supplied with this tiling does not qualify for the exemptions contained 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 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.

[GNATURE: RAD 4/84/1974]

SIGNATURE AND TYPED OR PRINTED NOISE OF SIGNING OFFICER OR DIRECTOR