2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004114

FILED Apr 16, 2007 Secretary of State

Entity Name: THE FRIENDS OF FRUITVILLE PUBLIC LIBRARY, INC.

Current Principal Place of Business: New Principal Place of Business: 100 COBURN RD. SARASOTA, FL 34240 **Current Mailing Address: New Mailing Address:** 100 COBURN RD SARASOTA, FL 34240 FEI Number: 65-1114021 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMATO, SHARI 13325 N. BRANCH ROAD SARASOTA, FL 34240 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete ROSNER, MARY CHAPMAN, KITTIE Name: Name: 3367 SANDLEHEATH Address: 1201 COWPEN LANE Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34240 Title: () Delete Title: (X) Change () Addition WILLIAMS, FREDRICKA Name: WILLIAMS, FREDRICKA Name: Address: 7748 CASTLE ISLAND DRIVE Address: 7748 CASTLE ISLAND DRIVE City-St-Zip: SARASOTA, FL 34240 City-St-Zip: SARASOTA, FL 34240 Title: () Delete Title: () Change () Addition AMATO, SHARI Name: Name: Address: 13325 N. BRANCH ROAD Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip: Title: VD () Delete Title: PD (X) Change () Addition Name: SHANAHAN, JANICE Name: SHANAHAN, JANICE 8037 WATERVIEW BLVD 8037 WATERVIEW BLVD Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: BRADENTON, FL 34202 Title: () Delete Title: () Change () Addition KRUPKIN, STUART Name: Name: 3391 HADFIELD GREENE Address: Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHANNESEN, JAN BOSERUP, THERESE Name: Name: Address: 1051 RACIMO DRIVE Address: 4948 TAYWATER DELL SARASOTA, FL 34240 SARASOTA, FL 34235 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNE AMATO TD 04/16/2007