

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01766

FILED
Apr 19, 2005
Secretary of State

Entity Name: FRIENDS OF THE LIBRARY OF LAKE LAND, FLORIDA, INCORPORATED

Current Principal Place of Business:

LAKELAND PUBLIC LIBRARY
100 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

SUSAN CRAWFORD
100 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 59-2563185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROADHEAD, LISA
100 LAKE MORTON DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

LILYQUIST, LISA
100 LAKE MORTON DRIVE
LAKELAND, FL 33801 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: LISA LILYQUIST

04/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WORKMAN, MICHAEL
Address: 500 SOUTH FLORIDA AVE., STE 800
City-St-Zip: LAKELAND, FL 33802

Title: SD () Delete
Name: BURROUGHS, TAMARA
Address: 53 LAKE MORTON DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: TD () Delete
Name: CHARLET, KERRY
Address: 205 E. ORANGE STREET
City-St-Zip: LAKELAND, FL 33801

Title: PP () Delete
Name: MARTIN, ELIZABETH
Address: 3101 CARLETON CIRCLE WEST
City-St-Zip: LAKELAND, FL 33803

Title: VP () Delete
Name: WOODS, LILLIAN
Address: 5950 IMPERIAL LAKES BLVD.
City-St-Zip: MULBERRY, FL 33860

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WOODS, LILLIAN
Address: 5950 IMPERIAL LAKES BLVD.
City-St-Zip: MULBERRY, FL 33860

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PP (X) Change () Addition
Name: WORKMAN, MICHAEL
Address: 500 SOUTH FLORIDA AVE., STE 800
City-St-Zip: LAKELAND, FL 33802

Title: VP (X) Change () Addition
Name: BABB, DONNA
Address: 3823 CHEVERLY DRIVE, E.
City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TAMARA BURROUGHS

SD

04/19/2005

Electronic Signature of Signing Officer or Director

Date