

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01766

FILED
Apr 19, 2007
Secretary of State

Entity Name: FRIENDS OF THE LIBRARY OF LAKELAND, 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:

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

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: BABB, DONNA
Address: 3825 CHEVERLY DRIVE, E.
City-St-Zip: LAKELAND, FL 33813

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: WOODS, LILLIAN
Address: 218 PINE STREET
City-St-Zip: LAKELAND, FL 33801

Title: VP () Delete
Name: ROWBOTHAM, BONNIE
Address: 915 BROOKWOOD DRIVE
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROWBOTHAM, BONNIE
Address: 915 BROOKWOOD DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: SD (X) Change () Addition
Name: BORDEN, GAIL
Address: 3226 STONEWATER DRIVE
City-St-Zip: LAKELAND, FL 33803

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

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

Title: VP (X) Change () Addition
Name: KRAUSE, CAROL
Address: 6550 CREWS LAKE HILLS LOOP, 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 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: KERRY CHARLET

TD

04/19/2007

Electronic Signature of Signing Officer or Director

Date