2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01826

FILED Apr 12, 2010 Secretary of State

Entity Name: FRIENDS OF THE KEYSTONE HEIGHTS BRANCH LIBRARY, INC.

Current Principal Place of Business: New Principal Place of Business:

175 ORIOLE STREET

KEYSTONE HEIGHTS, FL 32656

Current Mailing Address: New Mailing Address:

PO BOX 710

KEYSTONE HEIGHTS, FL 32656

FEI Number: 59-2438932 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:

WHIPPLE, MARGARET 345 SW PEACH ST

KEYSTONE HEIGHTS, FL 32656 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: TEAGUE, JUANITA Address: 7824 ST. RD 21

City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: TD

Name: MALLARD, AIDA

Address: 6768 BEDFORD LAKE RD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: SD

Name: SEABROOK, PAULA Address: 675 JASMINE AVE

City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title:

Name: SHIELDS, ANNE

Address: 6906 DEER SPRINGS RD.
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D

 Name:
 BUCKRIDGE, ROSEMARY

 Address:
 6905 DEER SPRINGS ROAD

 City-St-Zip:
 KEYSTONE HEIGHTS, FL 32656

Title: VPD

Name: SPONHOLTZ, ANNE Address: 6537 TRIEST AVE.

City-St-Zip: KEYSTONE HEIGHTS, FL 32656

I hereby 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 all other like empowered.

SIGNATURE: ROSEMARY BUCKRIDGE D 04/12/2010