## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001235

**FILED** May 15, 2008 Secretary of State

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

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

777 SOUTH COUNTY ROAD 314A OCKLAWAHA, FL 32179

**Current Mailing Address: New Mailing Address:** 

777 SOUTH COUNTY ROAD 314A OCKLAWAHA, FL 32179

FEI Number: 43-1976251 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUNTER, PATRICIA A MACFARLAND, NANCY 12680 S. E. 143 CT. 16112 SE 15TH ST

OCKLAWAHA, FL 32179 US OCKLAWAHA, FL 32179 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: NANCY MACFARLAND 05/15/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

19651 S.E. 92ND PLACE

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

177 NE 170TH CT

(X) Change ( ) Addition () Delete

HUNTER, PATRICIA A MACFARLAND, NANCY Name: Name:

P. O. BOX 1598 Address: P. O. BOX 2083 Address: City-St-Zip: OCKLAWAHA, FL 32183 City-St-Zip: SILVER SPRINGS, FL 34489

Title: () Delete Title: (X) Change ( ) Addition HARRIS, DIANA Name: POOLE, DONNA Name:

Address: 770 S. E. 170TH AVE Address: 18901 E. HWY 40 APT 49 City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: SILVER SPRINGS, FL 34488

Title: () Delete Title: (X) Change ( ) Addition POOLE, DONNA ROSA, DIEHL Name: Name:

18901 E. HWY. 40 APT. 49 Address: Address: 18292 SE 24TH ST City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: SILVER SPRINGS, FL 34488

Title: ( ) Delete Title: (X) Change ( ) Addition

MACFARLAND, NANCY Name: Name: WILEY, ANITA Address: 16112 S. E. 15TH ST. Address: P. O. BOX 1083 City-St-Zip: OCKLAWAHA, FL 32179 SILVER SPRINGS, FL 34489

City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition WALKER, JACKIE WEBSTER, BARBARA Name: Name:

City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: SILVER SPRINGS, FL 34488

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

SIGNATURE: NANCY MACFARLAND **PRES** 05/15/2008

Electronic Signature of Signing Officer or Director

Date