

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004253

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** FRIENDS OF THE SOUTHEAST BRANCH LIBRARY OF ST. JOHNS COUNTY, INC.

**Current Principal Place of Business:**

6670 US 1 SOUTH  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

6670 US 1 SOUTH  
ST AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 75-3065273

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAM, MARTIN MR  
800 BRANDYWINE COURT  
SAINT AUGUSTINE, FL 32086 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  
Name: LEVY, HARRIET MS  
Address: 276 SEA WOODS DR. N  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S  
Name: CONWAY, THIRZA  
Address: 606 PARKER COURT  
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: T  
Name: WILLIAM, MARTIN M MR  
Address: 800 BRANDYWINE COURT  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: WILLIAM MARTIN

T

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date