

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007070

FILED
Apr 03, 2009
Secretary of State

Entity Name: FRIENDS OF THE MULBERRY LIBRARY, INC.

Current Principal Place of Business:

104 S. CHURCH AVENUE
MULBERRY, FL 33860 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 707
MULBERRY, FL 33860 US

New Mailing Address:

FEI Number: 59-2381892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURH, GERALD T
104 S. CHURCH AVENUE
MULBERRY, FL 33860 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: PD () Delete
Name: COTE, NANCY M
Address: 6705 TRAIL RIDGE DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: TD () Delete
Name: BOURQUEIN, RAE
Address: 3602 TIGEREYE COURT
City-St-Zip: MULBERRY, FL 33860

Title: SD () Delete
Name: MCLAUGHLIN, LOU
Address: 109 N.E. 4TH AVENUE
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: MARKUSFELD, MARIA
Address: 57 WOOD HALL DRIVE
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: COTE, RICHARD J
Address: 6705 TRAIL RIDGE DRIVE
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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.

SIGNATURE: RAE BOURQUEIN

TD

04/03/2009

Electronic Signature of Signing Officer or Director

Date