

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90088 034 ****61.25

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1. Entity Name

**FRIENDS OF THE FORT MCCOY PUBLIC LIBRARY,
INC.**



Principal Place of Business

14660 NE HIGHWAY 315
FORT MC COY FL 32134

Mailing Address

PO BOX 453
FORT MC COY FL 32134

50013441



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

57-1184071

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MALKIN, FRED
10700 NE HIGHWAY 315
FORT MCCOY FL 32134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

(Fred Malkin)

3/16/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
BENZ, MARY SUE
10930 NE 149TH LANE
FORT MCCOY FL 32134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
KAHN, SUSAN
10057 NE 199TH ST, RD
FORT MCCOY FL 32134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
BRUUN, PAT
14485 NE 119TH CT
FORT MCCOY FL 32134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BRENNAN, SYBIL
22151 NE 151 LANE
FORT MCCOY FL 32134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
BAADER, LYNN
15899 NE 132ND CT; PO BOX 517
FORT MCCOY FL 32134**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
*D
Baader, Lynn
15899 NE 132nd Ct. / P.O. Box 517
Fort McCoy FL 32134*

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROBERTS, MARTHA
13200 NE 90TH ST
FORT MCCOY FL 32134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

Susan Kahn

3/16/06 352-546-2201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

50013.441

#NO 300000 2866

FRIENDS OF THE FORT McCOY PUBLIC LIBRARY, INC. 57-1184071

ATTACHMENT TO 2006 ANNUAL REPORT FORM:

Continuation of Block 11 to include officers and directors not listed in Block 10 of pre-printed 2006 Annual Report Form:

DS

Janet Stevens (Addition)
14531 NE 188th Place
Fort McCoy, FL 32134

D

Larry Kent (Addition)
17571 NE 138th Terr.
Fort McCoy, FL 32134

D

Fred Malkin (Addition)
10700 NE Hwy. 315
Fort McCoy, FL 32134