

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001785

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** FRIENDS OF THE NORTH FORT MYERS PUBLIC LIBRARY, INC.

**Current Principal Place of Business:**

2001 NORTH TAMiami TRAIL, NE  
NORTH FT. MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

2001 NORTH TAMiami TRAIL, NE  
NORTH FT. MYERS, FL 33903

**New Mailing Address:**

**FEI Number:** 20-0859486

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANZAONE, GERALDINE  
19871 DIAMOND HILL COURT  
N. FT. MYERS, FL 33903 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:** S  
**Name:** EDMIER, CAROL  
**Address:** 17807 DRACUNA CIRCLE  
**City-St-Zip:** NORTH FORT MYERS, FL 33917

**Title:** T  
**Name:** RINKEVICZ, ROSEMARY  
**Address:** 7019 NEW POST ROAD  
**City-St-Zip:** NORTH FT. MYERS, FL 33917

**Title:** D  
**Name:** WHITACRE, JEANNETTE E  
**Address:** 19296 POTOMAC CIRCLE  
**City-St-Zip:** NORTH FORT MYERS, FL 33917

**Title:** D  
**Name:** WHITACRE, WILLIAM W  
**Address:** 19296 POTOMAC CIRCLE  
**City-St-Zip:** NORTH FORT MYERS, FL 33917

**Title:** P  
**Name:** YORDE, LINDA  
**Address:** 18771 CROSSWIND AVE.  
**City-St-Zip:** NORTH FORT MYERS, FL 33917

**Title:** V  
**Name:** REED, JESSICA  
**Address:** 220 N. E. 23RD PLACE  
**City-St-Zip:** CAPE CORAL, FL 33909

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:** ROSE MARY RINKEVICZ

TRSR

01/06/2012

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

\_\_\_\_\_  
Date