


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90037 031 \*\*\*\*61.25

<b>DOCUMENT # N04000001809</b>	
1. Entity Name FRIENDS OF SOUTH BRANCH LIBRARY, INC.	

Principal Place of Business % SOUTH BRANCH LIBRARY 2300 ROY HANNA DRIVE SOUTH ST. ETERSBURG, FL 33712	Mailing Address % SOUTH BRANCH LIBRARY 2300 ROY HANNA DRIVE SOUTH ST. ETERSBURG, FL 33712
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**40067444**



2. Principal Place of Business - No P.O. Box # % South Branch Library Suite, Apt. #, etc. 2300 Roy Hanna Dr South City & State St. Petersburg, FL Zip 33712	3. Mailing Address % South Branch Library Suite, Apt. #, etc. 2300 Roy Hanna Drive South City & State St. Petersburg, FL Zip 33712
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03192008 Chg-NP CR2E037 (12/06)

4. FEI Number 65-1211412	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CARPENTER, MARIE Z C/O SOUTH BRANCH LIBRARY 2300 ROY HANNA DRIVE SOUTH SAINT PETERSBURG, FL 33712	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P COGGINS, PAUL B 6909 DR. MARTIN LUTHER KING ST #297 SAINT PETERSBURG, FL 33712 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MURRAY, MARY K 1643 58TH TERRACE SOUTH SAINT PETERSBURG, FL 33712 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CARPENTER, MARIE Z P.O. BOX 12436 SAINT PETERSBURG, FL 33733 <input type="checkbox"/> Delete	T Carpenter, Marie Z 5281 Isla Key Blvd; Apt 404 St Petersburg, FL 33715 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SHELMAN, ANDREE J 1175 PINELAS PT DR S ST. PETERSBURG, FL 33705 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Paul Ben Coggins 3/19/08 (727) 360-5383  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #