

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002271

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** FRIENDS OF RUPERT J. SMITH LAW LIBRARY OF ST. LUCIE COUNTY, INC.

**Current Principal Place of Business:**

221 SOUTH INDIAN RIVER DRIVE  
FT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

221 SOUTH INDIAN RIVER DRIVE  
FT PIERCE, FL 34950

**New Mailing Address:**

**FEI Number:** 20-0882903

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WALKER, JAMES T  
519 S INDIAN RIVER DR  
FT PIERCE, FL 34950 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: DT  
Name: D'AGATA, CHARLES R SR.  
Address: 2552 S.E.MORNINGSIDE BLVD.  
City-St-Zip: PORT ST.LUCIE, FL 34952

Title: D  
Name: CUNZO, KIM A  
Address: 601 CITRUS AVENUE  
City-St-Zip: FORT PIERCE, FL 34950

Title: DP  
Name: WALKER, JAMES T  
Address: 519 S. INDIAN RIVER DRIVE  
City-St-Zip: FORT PIERCE, FL 34950

Title: DS  
Name: EVERLOVE, NORA  
Address: 412 65TH ST. N.  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D  
Name: JUNGINGER, GEAN C JR.  
Address: 101 SOUTH 2ND STREET  
City-St-Zip: FORT PIERCE, FL 34950

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: CHARLES R. D'AGATA SR.

TREA

04/12/2012

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

\_\_\_\_\_  
Date