

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003234

FILED
Feb 24, 2008
Secretary of State

Entity Name: FRIENDS OF SOUTH COUNTY REGIONAL LIBRARY, INC.

Current Principal Place of Business:

21100 THREE OAKS PARKWAY
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

21100 THREE OAKS PARKWAY
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-0933469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUENSTEIN, CLAIRE S
20231 BURNSIDE PLACE #404
ESTERO, FL 33928 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: P () Delete
Name: HAUENSTEIN, CLAIRE S
Address: 20231 BURNSIDE PLACE #404
City-St-Zip: ESTERO, FL 33928

Title: V () Delete
Name: OBIE, CHARLES
Address: 20681 COUNTRY WALK WAY
City-St-Zip: ESTERO, FL 33928

Title: S () Delete
Name: MELDNER, DOROTHEA
Address: 6701 SEA ISLE DRIVE
City-St-Zip: FT. MYERS, FL 33908

Title: D () Delete
Name: SCHMIDT, GRETCHEN
Address: 20410 CHAPEL TRACE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: SHANDOR, STEPHEN
Address: 9182 SPRINGVIEW LOOP
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: PISCITELLO, CAROLYN
Address: 20802 BLACKSMITH FORGE
City-St-Zip: ESTERO, FL 33928

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
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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: CLAIRE S. HAUENSTEIN

P

02/24/2008

Electronic Signature of Signing Officer or Director

Date