

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008450

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** WESTON FRIENDS OF THE LIBRARY, INC.

**Current Principal Place of Business:**

4307 FOX HOLLOW  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

1656 ORION LANE  
WESTON, FL 33327

**New Mailing Address:**

**FEI Number:** 20-1606356

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

WEISS SEROTA HELFMAN PASTORIZA GUEDES COLE  
2665 S BAYSHORE DR STE 420  
MIAMI, FL 33133 US

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:** D  
**Name:** HABIB, MONA  
**Address:** 4307 FOX HOLLOW  
**City-St-Zip:** WESTON, FL 33331

**Title:** D  
**Name:** KORMAN, ELLEN  
**Address:** 490 ALEXANDRA CIRCLE  
**City-St-Zip:** WESTON, FL 33326

**Title:** D  
**Name:** COHEN, ALEXANDRA  
**Address:** 1656 ORION LN  
**City-St-Zip:** WESTON, FL 33327

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:** ALEXANDRA L. COHEN

TREA

01/05/2011

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

\_\_\_\_\_  
Date