## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000028

Apr 15, 2009 Secretary of State

Entity Name: FRIENDS OF THE BRYCEVILLE BRANCH PUBLIC LIBRARY, INC.

**Current Principal Place of Business: New Principal Place of Business:** BRYCEVILLE BRANCH PUBLIC LIBRARY 7280 MOTES ROAD BRYCEVILLE, FL 32009 **New Mailing Address: Current Mailing Address:** BRYCEVILLE BRANCH PUBLIC LIBRARY 7280 MOTES ROAD BRYCEVILLE, FL 32009 FEI Number: 14-1947404 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: STEPHENS, CALVIN 1907 RIDGÉWOOD DRIVE FERNANDINA BEACH, FL 32034 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PICARD, RICHARD Name: Name: 5988 PRINGLE ROAD Address: Address: City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: Title: () Delete Title: () Change () Addition MCCUBBIN, CATHY Name: Name: Address: 6101 OLD KAY TOWN ROAD Address: City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition LITZELMAN, ANN T MORTON, PHIL Name: Name: 3009 EASTWOOD DRIVE 11704 SUNOWA SPRINGS TRAIL Address: Address: City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: BRYCEVILLE, FL 32009 Title: ( ) Delete Title: (X) Change ( ) Addition FOSTER, CAROL Name: Name: FOSTER, CAROL 9139 FORD ROAD Address: 7280 MOTES ROAD Address: City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: BRYCEVILLE, FL 32009

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: CAROL FOSTER D 04/15/2009