


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90242 028 ****61.25

DOCUMENT # N06000006483					
1. Entity Name FRIENDS OF WEST MELBOURNE PUBLIC LIBRARY, INC.					
Principal Place of Business 2755 WINGATE BLVD W MELBOURNE, FL 32904			Mailing Address 2755 WINGATE BLVD W MELBOURNE, FL 32904		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 141975918	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DYER, JEAN E 454 FLINTROCK AVE W MELBOURNE, FL 32904			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE P NAME DYER, JEAN E STREET ADDRESS 454 FLINTROCK AVE CITY-ST-ZIP W MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete				
TITLE S NAME BURGUET, ERMA STREET ADDRESS 50 SHERIDIAN WOODS DR CITY-ST-ZIP W MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete				
TITLE T NAME MCDUGALL, LORETTA STREET ADDRESS 1675 DALLAM AVE CITY-ST-ZIP NW PALM BAY, FL 32907	<input checked="" type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE P/D NAME Dyer, Jean E STREET ADDRESS 454 Flintrock Ave CITY-ST-ZIP W Melbourne, FL 32904	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE S/D NAME Burguet, Erma STREET ADDRESS 650 Sheridan Woods Dr. CITY-ST-ZIP W Melbourne, FL 32904	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE T/D NAME McDougall, Loretta STREET ADDRESS 1675 Dallam Ave CITY-ST-ZIP NW Palm Bay FL 32907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
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"/> Change <input type="checkbox"/> Addition				
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: <u>Jean E Dyer</u>				4-11-07 321-951-0611	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	

ATTACHMENT 40065773

Division of Corporations
Annual Report

Document Number

N06000006483

Business Entity Name

FRIENDS OF WEST MELBOURNE PUBLIC
LIBRARY, INC.

FEI Number

141975918

FEI Number Status

Certificate of Status Desired

No

**Election Campaign Financing Trust Fund
Contribution**

No

Principal Place of Business

Address 2755 WINGATE BLVD

Suite, Apt. #, etc.

City, State W MELBOURNE, FL

Zip Code & Country 32904

Mailing Address

Address 2755 WINGATE BLVD

Suite, Apt. #, etc.

City, State W MELBOURNE, FL

Zip Code & Country 32904

Name and Address of Registered Agent

Name (Last, First, Middle, Title) DYER, JEAN, E

Address 454 FLINTROCK AVE

Suite, Apt. #, etc.

City, State W MELBOURNE, FL

Zip Code & Country 32904 US

Registered Agent Signature JEAN E. DYER

ATTACHMENT

3/17/07 10:20 AM

Officer/Director Name and Address

Title P
Name (Last, First, Middle, Title) DYER, JEAN, E
Street Address 454 FLINTROCK AVE
City, State W MELBOURNE, FL
Zip Code & Country 32904

Title S
Name (Last, First, Middle, Title) BURGUET, ERMA
Street Address 50 SHERIDIAN WOODS DR
City, State W MELBOURNE, FL
Zip Code & Country 32904

Title T
Name (Last, First, Middle, Title) MCDOUGALL, LORETTA
Street Address 1675 DALLAM AVE
City, State NW PALM BAY, FL
Zip Code & Country 32907

Title P
Officer/Director Signature JEAN E. DYER