

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N10161 (0)

1. Corporation Name

FRIENDS OF THE LIBRARY OF SOUTH BREVARD, INC.



Principal Place of Business

Mailing Address

% LOIS R OLYSLAGER
769 E ORIOLE CIR
BAREFOOT BAY FL 32976

% LOIS R OLYSLAGER
769 E ORIOLE CIR
BAREFOOT BAY FL 32976

3. Date Incorporated or Qualified

07/11/1985

3a. Date of Last Report

01/31/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

59-2470978

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OLYSLAGER, LOIS R
769 E ORIOLE CIR
BAREFOOT BAY FL 32976

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD ☒ DELETE
NAME WHITE, RUTH
STREET ADDRESS 104 FIG CT.
CITY-ST-ZIP BAREFOOT BAY FL

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME Carol E. Grube
1.3 STREET ADDRESS 701 Lantania Dr.
1.4 CITY-ST-ZIP Barefoot Bay, FL 32976

TITLE P ☒ DELETE
NAME MOULTON, MARCELLA F
STREET ADDRESS 929 BALSAM
CITY-ST-ZIP BAREFOOT BAY FL

2.1 TITLE Trustee ☒ Change ☐ Addition
2.2 NAME Marcella F Moulton
2.3 STREET ADDRESS 929 Balsam
2.4 CITY-ST-ZIP Barefoot Bay, FL 32976

NAME GASPARIAN, ROULETTA
STREET ADDRESS 1320 N. PERIWINKLE CIR.
CITY-ST-ZIP BAREFOOT BAY FL

3.1 NAME Rouletta Gasparian ☒ Change ☐ Addition
3.2 STREET ADDRESS 1320 Periwinkle
3.3 CITY-ST-ZIP Barefoot Bay, FL 32976

TITLE T ☐ DELETE
NAME GALARNEAU, CHRISTINE
STREET ADDRESS 3900 HICKORY DR.
CITY-ST-ZIP MICCO FL

4.1 TITLE Trustee ☐ Change ☒ Addition
4.2 NAME Lorraine Hintz
4.3 STREET ADDRESS 6060 River Grove Dr.
4.4 CITY-ST-ZIP Micco, FL 32976

TITLE S ☐ DELETE
NAME PITTS, LESLIE
STREET ADDRESS 734 N. PERIWINKLE CIR.
CITY-ST-ZIP BAREFOOT BAY FL

5.1 TITLE Trustee ☐ Change ☐ Addition
5.2 NAME Rita Ryskamp
5.3 STREET ADDRESS 403 S. Sea Gull Cir.
5.4 CITY-ST-ZIP Barefoot Bay, FL 32976

TITLE TR ☒ DELETE
NAME STORTSTROM, PEARL
STREET ADDRESS 910 SPRUCE ST.
CITY-ST-ZIP BAREFOOT BAY FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Christine E. Galarneau, Treas.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTINE E. GALARNEAU

Jan 24, 1996 (407) 444-5740
Date Daytime Phone

CR2E037 (12/95)