

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004572

FILED  
Apr 17, 2012  
Secretary of State

**Entity Name:** FRIENDS OF SOUTH REGIONAL-BROWARD COLLEGE LIBRARY, INC

**Current Principal Place of Business:**

7300 PINES BLVD.  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

7300 PINES BLVD.  
PEMBROKE PINES, FL 33024

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PLUMMER, MAXINE  
7300 PINES BLVD.  
PEMBROKE PINES, FL 33024 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  
Name: PLUMMER, MAXINE  
Address: 7300 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: 1VP  
Name: SMITH, SUSAN  
Address: 7300 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T  
Name: WALTERS, ARLENE  
Address: 7300 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: S  
Name: WHITE, ERICA  
Address: 7300 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

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: MAXINE PLUMMER

PRES

04/17/2012

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

\_\_\_\_\_  
Date