

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000005219

**FILED**  
**May 18, 2012**  
**Secretary of State**

**Entity Name:** HARLEM COMMUNITY LIBRARY FRIENDS INC

**Current Principal Place of Business:**

1010 J HARLEM ACADEMY AVE  
CLEWISTON, FL 33440

**New Principal Place of Business:**

1010 J HARLEM ACADEMY AVE.  
CLEWISTON, FL 33440

**Current Mailing Address:**

1010 J HARLEM ACADEMY AVE  
CLEWISTON, FL 33440

**New Mailing Address:**

1010 J HARLEM ACADEMY AVE.  
CLEWISTON, FL 33440

**FEI Number:** 13-4319454

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUMPHREY, SYLVESTER  
1147 FLORIDA AVE  
CLEWISTON, FL 33440 US

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

HUMPHREY, SYLVESTER  
1147 FLORIDA AVE.  
CLEWISTON, FL 33440 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: SYLVESTER HUMPHREY

05/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DYKES, BARBARA  
Address: 1043 VIRGINIA AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: VP  
Name: DIDLEY, OTIS JR.  
Address: 1204 CAROLINA AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: S  
Name: WHITE, VERMELL  
Address: 1053 TEXAS AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: T  
Name: BROWN, ELEANOR  
Address: 1024 KENTUCKY AVE.  
City-St-Zip: CLEWISTON, FL 33440

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: BARBARA DYKES

P

05/18/2012

Electronic Signature of Signing Officer or Director

Date