

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90254 024 ****61.25

DOCUMENT # N18474

1. Entity Name

FRIENDS OF THE HOKE LIBRARY IN JENSEN BEACH, INC.



Principal Place of Business

1150 NW JACK WILLIAMS WAY
JENSEN BEACH FL 34957
US

Mailing Address

PO BOX 427
JENSEN BEACH FL 34958
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2822030

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEAL, CATHIE H.
2036 N.E. RIVER COURT
JENSEN BEACH FL 33457

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME TEAL, CATHIE H.
STREET ADDRESS 2036 N.E. RIVER COURT
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME DOWD, SUZANNE
STREET ADDRESS 196 NE BLUEBERRY TERRACE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME LITTON, ANNE
STREET ADDRESS 3246 NE CAFAMARAN TERRACE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☒ Delete
NAME STEWART, CAROL
STREET ADDRESS 9550 S OCEAN DRIVE #1309
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☒ Addition
NAME Linda Barriale
STREET ADDRESS 421 N.W. Dewberry terr.
CITY-ST-ZIP Jensen Beach, FL 34957

TITLE TD ☐ Delete
NAME BALCIULIS, KATHLEEN
STREET ADDRESS 127 COVE VIEW
CITY-ST-ZIP STUART FL 34994

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Kathleen Balciulis Treasurer*

4/26/06

772 332 988