2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2009
Secretary of State

DOCUMENT# N22929

Entity Name: FRIENDS OF LITERACY THROUGH LIBRARIES, INC.

Current Principal Place of Business:

AAR LIBRART
2650 SISTRUNK BLVD
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

AARLCC
2650 SISTRUNK BLVD
FORT LAUDERDALE, FL 33311 US

Current Mailing Address:

4631 NW 31ST AVENUE
SUITE #228
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

AARLCC
2650 SISTRUNK BLVD
FORT LAUDERDALE, FL 33311 US

FEI Number: 65-0003795 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FRADY, SHARRON
739 SW 158 TERRACE
PEMBROKE PINES, FL 33027 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 ( ) Delete
Name: RYAN, PETER
Address: 6130 NW 34 WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VP ( ) Delete
Name: TEKLA, NICHOLAS
Address: 5132 CHARDONNAY DR
City-St-Zip: CORAL SPRINGS, FL 33067

Title: T ( ) Delete
Name: FRADY, SHARON
Address: 739 SW 158 TERR
City-St-Zip: PEMBROKE PINES, FL 330275000

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RYAN, PETER MR.
Address: 6130 NW 34 WAY
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VP (X) Change ( ) Addition
Name: NICHOLAS, TEKLA MRS.
Address: 5132 CHARDONNAY DR
City-St-Zip: CORAL SPRINGS, FL 33067

Title: T (X) Change ( ) Addition
Name: FRADY, SHARRON MS
Address: 739 SW 158 TERR
City-St-Zip: PEMBROKE PINES, FL 330275000

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHARRON FRADY T 07/08/2009
Electronic Signature of Signing Officer or Director Date