

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27423

FILED
May 01, 2012
Secretary of State

Entity Name: FRIENDS OF THE JACKSONVILLE PUBLIC LIBRARY, INC.

Current Principal Place of Business:

303 N. LAURA ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

303 N. LAURA ST
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-1101666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, RICHARD K
501 BAY STREET
TAYLOR, MOSELY & JOYNER, ATTORNEYS
JACKSONVILLE, FL 32202 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: PD
Name: REAGAN, HARRY
Address: 55 WEST 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D
Name: CRESCIMBENI, JOHN R
Address: P.O. BOX 8962
City-St-Zip: JACKSONVILLE, FL 32239

Title: VPD
Name: SIVASUBRAMANIAN, NITYA
Address: 4214 METRON DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD
Name: SMITH, MARGARET
Address: 1424 BELMONTE AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD
Name: NASH, JACQUELINE
Address: 3025 ALTAMONTE AVENUE E
City-St-Zip: JACKSONVILLE, FL 32208

Title: TD
Name: HODGES, AMANDA
Address: 22089 CHERYL DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

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: HARRY REAGAN

PD

05/01/2012

Electronic Signature of Signing Officer or Director

Date