

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N28883 (9)

1. Corporation Name

FRIENDS OF CENTRAL RIDGE LIBRARY, INC.



Principal Place of Business

Mailing Address

Central Ridge Library
425 W. Roosevelt Blvd.
BEVERLY HILLS FL 34465
US

3. Date Incorporated or Qualified
10/17/1988

3a. Date of Last Report
04/13/1995

2. Principal Place of Business

2a. Mailing Address

21 Central Ridge Library

26

4. FEI Number
59-2867230

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 425 W. Roosevelt Blvd.

27

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

City & State

City & State

23 Beverly Hills, FL

28

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 34465

25 US

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEBER, WOLFGANG W.
906 W. COLBERT CT.
BEVERLY HILLS FL 34465

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **WEBER, WOLFGANG**
STREET ADDRESS **906 W. COLBERT CT.**
CITY-ST-ZIP **BEVERLY HILLS FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE
NAME **KIKUCHI, LUCY**
STREET ADDRESS **75 S. LINCOLN AVE.**
CITY-ST-ZIP **BEVERLY HILLS FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **S** ☐ DELETE
NAME **BLEITZHOFFER, PEGGY**
STREET ADDRESS **874 W. COLBERT CT.**
CITY-ST-ZIP **BEVERLY HILLS FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **S**
3.3 STREET ADDRESS **Dean, Jackie**
3.4 CITY-ST-ZIP **3572 N. Woodgate Dr.**
Beverly Hills, FL 34465

TITLE **S** ☐ DELETE
NAME **PETERSON, PATRICIA**
STREET ADDRESS **882 W. COLBERT CT.**
CITY-ST-ZIP **BEVERLY HILLS FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **T** ☐ DELETE
NAME **WEBER, ANNE MARIE**
STREET ADDRESS **906 W. COLBERT CT.**
CITY-ST-ZIP **BEVERLY HILLS FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **BROWN, BURTON**
STREET ADDRESS **4698 N. JADEMOOR DR.**
CITY-ST-ZIP **BEVERLY HILLS FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Wolfgang Weber **WOLFGANG WEBER**

2/19/96 (352) 746-3708

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (12/95)