

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007 8:00 am
Secretary of State

01-05-2007 90029 001 ****61.25

DOCUMENT # N28883

1. Entity Name
FRIENDS OF CENTRAL RIDGE LIBRARY, INC.



Principal Place of Business
**CENTRAL RIDGE LIBRARY
425 W ROOSEVELT BLVD
BEVERLY HILLS, FL 34465 US**

Mailing Address
**PO BOX 640158
BEVERLY HILLS, FL 34464 US**

400000050



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2867230

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**STILLMAN, PEGGY
5475 N MALLOWS CIRCLE
BEVERLY HILLS, FL 34465-4574**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
HADERER, SUE
1900 W TALL OAKS DR
BEVERLY HILLS, FL 34465**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**Janeen Caudle, Pres.
4303 N. Indianhead Rd.
Hernando FL 34442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DEAN, JACQUELINE
3572 N WOODGATE DR
BEVERLY HILLS, FL 34465**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**Sue Haderer
1900 W. Tall Oaks Dr
Beverly Hills FL 34465**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BARRY, SUE
548 W MASSACHUSETTS ST
HERNANDO, FL 34442**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Jean Racine
1781 E. Westgate Lane
Hernando FL 34465**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
STILLMAN, PEGGY
5475 N MALLOWS CIR
BEVERLY HILLS, FL 344654574**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
RACINE, JEAN
1781 E WESTGATE LANE
HERNANDO, FL 34442**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**Jacqueline Dean
3572 N. Woodgate Dr
Beverly Hills FL 34465**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BLINN, ANNA
3895 W CATALPA LA
BEVERLY HILLS, FL 34465**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**Helen Brophy
5537 Twinkie Point
Beverly Hills FL 34465**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Peggy Stillman PEGGY STILLMAN

1/4/07 352-527-6909

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #