

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29845

1. Entity Name

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FILED

Apr 16, 2001 8:00 am  
Secretary of State

04-16-2001 90257 019 \*\*\*\*61.25

Principal Place of Business

15200 SW ADAMS AVE  
PO BOX 244  
INDIANTOWN FL 34956  
US

Mailing Address

15858 S.W. WARFIELD BOULEVARD  
PO BOX 244  
INDIANTOWN FL 34956

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0089459

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

DAVIES, ALEPH H.  
15700 S.W. FAMEL BLVD.  
INDIANTOWN FL 34956

7. Name and Address of New Registered Agent

Name

Barbara Jean Taylor

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

14621 SW Divot Drive

City

Indiantown

FL

Zip Code  
34956

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.

SIGNATURE Barbara Jean Taylor

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-11-01

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE VD  
NAME IRELAND, MARIANNE  
STREET ADDRESS 14252 SW CANAL RD  
CITY-ST-ZIP INDIANTOWN FL 34956 ☒ Delete

TITLE PD  
NAME MATSON, J A  
STREET ADDRESS 16142 SW FIVE WOOD WAY  
CITY-ST-ZIP INDIANTOWN FL 34856 ☒ Delete

TITLE TD  
NAME DAVIES, ALEPH H  
STREET ADDRESS 15700 SW FAMEL AVE  
CITY-ST-ZIP INDIANTOWN FL 34956 ☒ Delete

TITLE SD  
NAME PAGE, LOIS  
STREET ADDRESS 14918 SW 171ST AVE  
CITY-ST-ZIP INDIANTOWN FL 34956 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME Renita J. Presler  
STREET ADDRESS 15400 SW Palm Drive  
CITY-ST-ZIP Indiantown, FL 34956 ☒ Change ☐ Addition

TITLE VP  
NAME Dorothy Adami  
STREET ADDRESS 16233 SW Indianwood Circle  
CITY-ST-ZIP Indiantown, FL 34956 ☒ Change ☐ Addition

TITLE TD  
NAME Barbara Jean Taylor  
STREET ADDRESS 14621 SW Divot Drive  
CITY-ST-ZIP Indiantown, FL 34956 ☒ Change ☐ Addition

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED  
Barbara Jean Taylor

4-11-01 561-587-4664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)