

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29845

FILED
Mar 22, 2005
Secretary of State

Entity Name: FRIENDS OF THE LIBRARY OF INDIANTOWN, FLORIDA, INC.

Current Principal Place of Business:

15200 SW ADAMS AVE
PO BOX 244
INDIANTOWN, FL 34956 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 244
INDIANTOWN, FL 34956

New Mailing Address:

FEI Number: 65-0089459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, BARBARA JEAN
14621 SW DIVOT DRIVE
INDIANTOWN, FL 34956 US

Name and Address of New Registered Agent:

RABENER, DEBORAH J
15380 SW PALM DRIVE
INDIANTOWN, FL 34956 US

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: DEBORAH J. RABENER

03/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARENTEAU, ALISHIA
Address: 15802 MORGAN STREET
City-St-Zip: INDIANTOWN, FL 34956

Title: VP () Delete
Name: FOSTER, EDDIE
Address: 1342 SW GAHAF AVE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: TD () Delete
Name: TAYLOR, BARBARA JEAN
Address: 14621 SW DIVOT DRIVE
City-St-Zip: INDIANTOWN, FL 34956

Title: SD () Delete
Name: FOSTER, JESSICA
Address: 1342 SW GAHAF AVE
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MAGOWAN, GAIL
Address: 14663 SW RAKE DRIVE
City-St-Zip: INDIANTOWN, FL 34956

Title: TD (X) Change () Addition
Name: RABENER, DEBORAH J
Address: 15380 SW PALM DRIVE
City-St-Zip: INDIANTOWN, FL 34956

Title: SD (X) Change () Addition
Name: ADAMI, DOROTHY
Address: 16233 SW INDIANWOOD CIRCLE
City-St-Zip: INDIANTOWN, FL 34956

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEBORAH J. RABENER

TD

03/22/2005

Electronic Signature of Signing Officer or Director

Date