2002 UNIFORM BUSINESS REPORT (UBR)

Apr 17, 2002 8:00 am Secretary of State **DOCUMENT # N30910** 1. Entity Name FRIENDS OF THE BRADEN RIVER LIBRARY, INC. 4-17-2002 90010 021 ****61.25 Principal Place of Business Mailing Address 4915 53RD AVENUE, EAST P O BOX 20506 **BRADENTON FL 34203 BRADENTON FL 34203** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0099691 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HAGER, WILLIAM M 6934 STONEYWALK COURT **BRADENTON FL 34203** City 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. **Department of State** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/01) ☐ Addition TITLE ☐ Defete TITLE MORAN, RICHARD F NAME NAME STREET ADDRESS STREET ADDRESS 6724 THE MASTERS AVE CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL 34202** Change ☐ Addition ☐ Delete TITLE HOLTON, JANICE NAME STREET ADDRESS 6319 STONE RIVER ROAD STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **BRADENTON FL 34203** Change ☐ Addition ☐ Delete. TITLE HAGER, WILLIAM M. NAME NAME STREET ADDRESS STREET ADDRESS 6934 STONEY WALK CT CITY-ST-ZIP CITY-ST-ZIP Bradenton FL 34203 Change ☐ Addition ☐ Delete TITLE TITLE GILPIN JOSEPH NAME NAME STREET ADDRESS 6418 GLEN ABBEY LN STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** SD ☐ Delete TITLE ☐ Change Addition TIT) F NAME Darr, Donna NAME STREET ADDRESS STREET ADDRESS 9916 CHALET CIRCLE CITY-ST-ZIP **BRADENTON FL 34203** CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TIT! F TITLE GARRISON, SANDRA NAME NAME STREET ADDRESS STREET ADDRESS 5916 E 18 AVE CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34208** 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:

SUSTINGUED MRE GLOCED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02

941 755-5456

Daytime Phone #

FILED