## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31721

Jul 3<u>1, 2</u>007 Secretary of State

Entity Name: THE FRIENDS OF THE PORT ST. JOHN LIBRARY, INC. **New Principal Place of Business: Current Principal Place of Business:** 6500 CAROLE AVE COCOA, FL 32927 **Current Mailing Address: New Mailing Address:** 6500 CAROLE AVE COCOA, FL 32927 FEI Number: 59-2953996 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEZENDORE, HELEN DEZENDORF, HELEN 6383 FAIRCHÍLD AVE 6383 FAIRCHILD AVE COCOA, FL 32927 COCOA, FL 32927 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: HELEN DEZENDORF 07/31/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DEZENDORF, HELEN Name: Name: Address: 6383 FAIRCHILD AVE Address: City-St-Zip: COCOA, FL 32927 City-St-Zip: Title: () Delete Title: () Change () Addition OLSON, DORIS JEAN Name: Name: Address: 6000 EAGLE WALK AVE. Address: City-St-Zip: PORT ST JOHN, FL 32927 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: HELEN DEZENDORF PD 07/31/2007