2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State
02-12-2007 90089 039 ****70.00

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1. Entity Name
FRIENDS OF LAKES REGIONAL LIBRARY, INC.

Principal Place of Business	Mailing Address
LAKES REGIONAL LIBRARY 15290 BASS RD SOUTH FORT MYERS, FL 33919	PO BOX 07054 FORT MYERS, FL 33919-0054

01212007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	P.O. BOX 08242
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Fort Myers, FL
Zip / Country	Zip: 33908 / Country

4. FEI Number: 65-0145488 ☐ Applied For ☐ Not Applicable

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
WELLES, ANNA 978 N WATERWAY DR FORT MYERS, FL 33919	Name: Dolores Ahlfeld Street Address (P.O. Box Number is Not Acceptable): 12811 Kelly Sands Way City: Fort Myers FL Zip Code: 33908

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: Dolores P. Ahlfeld Dolores P. Ahlfeld President 2-3-07
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WELLES, ANNA 978 N WATERWAY DR FORT MYERS, FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD Dolores Ahlfeld 12811 Kelly Sands Way Fort Myers, FL 33908-5964	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FLORENCE, MORRIS 8980 GREENWICH HILLS WAY, #101 FORT MYERS, FL 33908	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Florence Morris 16409 CoCo Hammock Way Fort Myers, FL 33908	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILES, GLORIA 970 N WATER WAY DR. FORT MYERS, FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TD Leonard Ahlfeld 12811 Kelly Sands Way Fort Myers, FL 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SIMONS, HELEN 3520 HERITGE LN FORT MYERS, FL 33908	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VD Helen Simons 3520 Heritage Ln Fort Myers, FL 33908	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALLFELD, DEE 12811 KELLY SANDS WAY FORT MYERS, FL 33908	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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 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: Dolores P. Ahlfeld DOLORES P. AHLFELD 2-3-07 239-482-0332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #