

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33176

FILED
Jan 22, 2010
Secretary of State

Entity Name: FRIENDS OF LAKES REGIONAL LIBRARY, INC.

Current Principal Place of Business:

LAKES REGIONAL LIBRARY
15290 BASS RD
SOUTH FORT MYERS, FL 33919

New Principal Place of Business:

LAKES REGIONAL LIBRARY
15290 BASS RD
FORT MYERS, FL 33919

Current Mailing Address:

P.O. BOX 08242
FORT MYERS, FL 33908

New Mailing Address:

LAKES REGIONAL LIBRARY
15290 BASS RD
FORT MYERS, FL 33919

FEI Number: 65-0145488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AHLFELD, DOLORES
12811 KELLY SANDS WAY
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: AHLFELD, DOLORES
Address: 12811 KELLY SANDS WAY
City-St-Zip: FORT MYERS, FL 33908

Title: SD
Name: FLORENCE, MORRIS
Address: 16409 COCO HAMMOCK WAY
City-St-Zip: FORT MYERS, FL 33908

Title: TD
Name: AHLFELD, LEONARD
Address: 12811 KELLY SANDS WAY
City-St-Zip: FORT MYERS, FL 33908 US

Title: VD
Name: SIMONS, HELEN
Address: 3520 HERITGE LN
City-St-Zip: FORT MYERS, FL 33908

I hereby 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 all other like empowered.

SIGNATURE: DOLORES P. AHLFELD

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01/22/2010

Electronic Signature of Signing Officer or Director

Date