

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90077 016 ****61.25

DOCUMENT # N35800

1. Entity Name

**FRIENDS OF THE DICKINSON MEMORIAL LIBRARY,
INC.**



Principal Place of Business

**148 ALBERTUS WAY
ORANGE CITY FL 32763-5966**

Mailing Address

**148 ALBERTUS WAY
ORANGE CITY FL 32763-5966**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2643072

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALEXANDER, KATHRYN
1100 N. THORPE AVE.
ORANGE CITY FL 32763**

7. Name and Address of New Registered Agent

Name

Wendy Bernardin

Street Address (P.O. Box Number is Not Acceptable)

186 Raintree Drive

Orange city, FL 32763

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Wendy Bernardin

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/23/06

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

TITLE PD ☐ Delete
NAME ALEXANDER, KATHRYN
STREET ADDRESS 1100 N. THORPE AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE DVPS ☐ Delete
NAME JONES, CAROLE
STREET ADDRESS 610 W. FRENCH AVE.
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE TD ☐ Delete
NAME ALEXANDER, KATHRYN
STREET ADDRESS 1100 N. THORPE AVE.
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE T ☐ Delete
NAME FIX, CHARLES
STREET ADDRESS 450 N. McDONALD, APT. 48
CITY-ST-ZIP DELAND FL 32724

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME Wendy Bernardin
STREET ADDRESS 186 Raintree Drive
CITY-ST-ZIP Orange City, FL 32763

TITLE V ☒ Change ☐ Addition
NAME Ethel McCann
STREET ADDRESS 371 Ferrin Court
CITY-ST-ZIP Orange City, FL 32763

TITLE T ☐ Change ☐ Addition
NAME Kathryn Alexander
STREET ADDRESS 1100 N. Thorpe Ave
CITY-ST-ZIP Orange city, FL 32763

TITLE S ☒ Change ☐ Addition
NAME Margaret Wootton
STREET ADDRESS 1500 W. French Ave.
CITY-ST-ZIP Orange city FL 32763

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Wendy Bernardin Wendy Bernardin

1/18/06 386-917-0514