2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N36723

Entity Name: THE FRIENDS OF THE PINE ISLAND LIBRARY, INC.

Current Principal Place of Business:

BOX 290
ST. JAMES CITY, FL 33956

New Principal Place of Business:

Current Mailing Address:

BOX 290
ST. JAMES CITY, FL 33956

New Mailing Address:

FEI Number: 59-2156500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRANITO, DOLORES
2961 BOWSPRIT LANE
SAINT JAMES CITY, FL 33956 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 ( ) Delete
Name: HIGGINS, DIANNE
Address: 7997 JUDGE BEON RD
City-St-Zip: BOKEELIA, FL 33922

Title: TD ( ) Delete
Name: GRANITO, DOLORES
Address: 2961 BOWSPRIT LANE
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: VPD ( ) Delete
Name: JACOBS, LINDA
Address: 5424 SERENITY COVE
City-St-Zip: BOKEELIA, FL 33922

Title: SD ( ) Delete
Name: ADAMS, JEANNE
Address: 7989 JUDGE BEON RD
City-St-Zip: BOKEELIA, FL 33922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: HIGGINS, DIANNE
Address: 7997 JUDGE BEAN RD
City-St-Zip: BOKEELIA, FL 33922

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: ADAMS, JEANNE
Address: 7989 JUDGE BEAN RD
City-St-Zip: BOKEELIA, FL 33922

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: DOLORES GRANITO TD 04/24/2009

Electronic Signature of Signing Officer or Director — Date