

2002 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
Apr 23, 2002 8:00 am
Secretary of State

03-28-2002 90139 036 ***61.25

DOCUMENT # N37306

1. Entity Name

FRIENDS OF THE LIBRARY-PONTE VEDRA BEACH, INC.

Principal Place of Business

Mailing Address

101 LIBRARY BLVD
PONTE VEDRA BEACH FL 32082
US

P.O. BOX 744
PONTE VEDRA BEACH FL 32004
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2998576

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

Name

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

City

FL

Zip Code

BARTLETT & HECKIN
50 HIGHWAY A1A
SUITE 103
PONTE VEDRA BEACH FL 32082

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ VP ☐ Delete
NAME **BERTISCH, CAROLEE**
STREET ADDRESS **104 CYPRESS LAGOON COVES**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ T ☐ Delete
NAME **JOHNSON, DONALD B**
STREET ADDRESS **128 LAKE JULIA DR NORTH**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

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

TITLE ☒ S ☐ Delete
NAME **DAVIS, MARY B**
STREET ADDRESS **120 WATER OAK DRIVE**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **CORRESPONDING SEC** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ D ☐ Delete
NAME **BERRY, VANCE**
STREET ADDRESS **113 LINKSIDE**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE ☒ RECORDING SEC ☐ Change ☒ Addition
NAME **GARY REICHOW**
STREET ADDRESS **104 INDIAN ROVE LANE**
CITY-ST-ZIP **PONTE VEDRA BEACH, FL 32082**

TITLE ☒ VD ☐ Delete
NAME **GALLAHEN, MARY LOUISE**
STREET ADDRESS **1301 S FIRST ST**
CITY-ST-ZIP **JACKSONVILLE BEACH FL**

TITLE ☒ VICE PRESIDENT ☐ Change ☒ Addition
NAME **SUSAN DRAW**
STREET ADDRESS **9240 OAKMONT COURT**
CITY-ST-ZIP **PONTE VEDRA BEACH, FL 32082**

TITLE ☒ P ☐ Delete
NAME **PORTRIE, CATHEY**
STREET ADDRESS **8010 MERGANSER DRIVE**
CITY-ST-ZIP **PONTE VEDRA BEACH FL**

TITLE ☒ VICE PRESIDENT ☐ Change ☒ Addition
NAME **MARTHA STACHITAS**
STREET ADDRESS **3032 CYPRESS CREEK DR E**
CITY-ST-ZIP **PONTE VEDRA BEACH, FL 32082**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 register 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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donal B Johnson
TREASURER

Date

Daytime Phone #

3/19/02 **904-285-**
5306

CR2E037 (9/01)