## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38144

FILED Mar 13, 2009 Secretary of State

Entity Name: E. C. ROWELL PUBLIC LIBRARY CORPORATION

**Current Principal Place of Business: New Principal Place of Business:** 

85 E. CENTRAL AVE. WEBSTER, FL 33597

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1044 WEBSTER, FL 33597

FEI Number: 65-0201767 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARSONS, ALPHEUS C 489 MARKET STREET WEBSTER, FL 33597 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

STD ( ) Delete (X) Change ( ) Addition FUSSELL, CAROL S. FUSSELL, CAROL S. Name: Name:

3287 CR 774 Address: 3287 CR 774 Address: City-St-Zip: WEBSTER, FL City-St-Zip: WEBSTER, FL 33597

Title: Title: ( ) Delete () Change () Addition LEE, JUDITH A Name: Name:

Address: 12861 CR 755 Address: City-St-Zip: WEBSTER, FL 33597 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition HARRIS, MICHAEL J HARRIS, MICHAEL J Name: Name:

Address: 23 S.E. 1ST AVE. Address: 23 S.E. 1ST AVE City-St-Zip: WEBSTER, FL City-St-Zip: WEBSTER, FL 33597

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: FUSSELL, JAMES O Name: FUSSELL, JAMES O Address: 3287 CR 774 Address: 3287 CR 774 City-St-Zip: WEBSTER, FL City-St-Zip: WEBSTER, FL 33597

Title: VD ( ) Delete Title: (X) Change ( ) Addition

RAY, DANIEL MONSON RAY, DANIEL MONSON Name: Name:

PO BOX 1404(182 SE 1ST AVE ) PO BOX 1404(182 SE 1ST AVE ) Address: Address: City-St-Zip: WEBSTER, FL City-St-Zip: WEBSTER, FL 33597

Title: () Delete MAURER, CLARICE Name: Name: Address: 112 CR 542 E Address: BUSHNELL, FL 33513 City-St-Zip: City-St-Zip:

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.

Title:

SIGNATURE: CAROL FUSSELL STD 03/13/2009