

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N39972

1. Entity Name

THE CENTRAL FLORIDA LIBRARY COOPERATIVE, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90009 038 ****70.00

Principal Place of Business

Mailing Address

431 E HORATIO AVE
230
MAITLAND FL 32751
US

431 E HORATIO AVE
230
MAITLAND FL 32751-4560
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

59-3126138

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WESTALL, MARTA
431 E HORATIO AVE
SUITE 230
MAITLAND FL 32751

Name

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

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.

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 NAME STREET ADDRESS CITY-ST-ZIP	P JASKOWSKI, SELMA 4000 CENTRAL FLORIDA BOULEVARD ORLANDO FL 32816-2686	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELSON, KAREN 219 INDIAN RIVER DRIVE COCOA FL 32922	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COHEN, DONNA 1000 HOLT AVENUE WINTER PARK FL 32789-4499	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAIMES, STEPHANIE 1995 NORTH DONELLY STREET MOUNT DORA FL 32757-4838	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGLISH, DENISE 9501 US 441 LEESBURG FL 34788-8751	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLINT, NANCY 204 N 5TH ST LEESBURG FL	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jaskowski, Selma	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Nelson, Karen	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Field, Dorothy 101 East Central Boulevard Orlando, 32801	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Hotz, Carol C. 3020 Maingate Lane Rm 4306 Kissimmee, FL 34747	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S English, Denise	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bargar, Sherie 817 Bill Beck Boulevard Kissimmee, FL 34744	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.03(1), 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

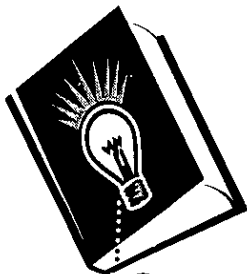
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

Attachment
D# N39972
00026563



CENTRAL FLORIDA
LIBRARY COOPERATIVE
*Supporting Libraries
and Sharing Ideas*

2000 UNIFORM BUSINESS REPORT
Document # N39972
Central Florida Library Cooperative

ADDITION TO NUMBER 10.
(OFFICERS AND DIRECTORS)

D
Westall, Marta
431 E. Horatio Avenue
Suite 230
Maitland, FL 32751

D
Phillips, Melissa
1000 AAA Drive
Heathrow, FL 32746-5063

CFLC BOARD OF DIRECTORS

President

Karen R. Nelson

Brevard County Library System

Vice President

Carol C. Hotz

Walt Disney World Co.

Secretary

Denise English

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Osceola County District Schools

Dorothy Field

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Nancy Ellen Flint

Leesburg Public Library

Selma K. Jaskowski

University of Central Florida

Melissa K. Phillips

AAA Research Library

Marta Westall

Executive Director