

**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Feb 16, 2005 8:00 am**  
**Secretary of State**

02-16-2005 90046 021 \*\*\*\*61.25

**DOCUMENT # N92000000629**

1. Entity Name

**THE FRIENDS OF THE FORT MYERS BEACH PUBLIC  
LIBRARY INCORPORATED**



Principal Place of Business

2755 ESTERO BLVD.  
FT. MYERS BEACH FL 33931

Mailing Address

2755 ESTERO BLVD.  
FT. MYERS BEACH FL 33931

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

65-0373229

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

**ZUMAR, JEANIE M  
16590 PATRIDGE PLACE RD #203  
FORT MYERS FL 33908**

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

SIGNATURE

*Jeannie M Zumar, Treasurer*

2-10-05

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  
Due By: May 1, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
ZUMAR, JEANIE  
16590 PATRIDGE PL RD #203  
FORT MYERS FL 33908 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WILLIAMS, PHYLLIS,  
15361 THORNTON RD.  
FORT MYERS FL 33908 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
TAFEL, LINDA L  
8065 LAGOON RD.  
FT MYERS BEACH FL 33931 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Sylvia Lockapelle  
601 Estero Blvd  
Fort Myers beach FL 33931 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
MATHEWS, JEAN  
2801 ESTERO BLVD.  
FORT MYERS BEACH FL 33931 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
STAPINSKI, PAT  
4560 ESTERO BLVD  
FORT MYERS BEACH FL 33931 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
Kathleen Smith  
5711 Lauder Street  
Fort Myers Beach FL 33931 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
COLES, JAMES A  
6970 KIMBERLY TER SW  
FORT MYERS FL 33919 ☐ Delete

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

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 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:

*Jeannie M Zumar, Treasurer* 2-10-05 239-4631672

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #