

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000629

FILED
Jan 04, 2008
Secretary of State

Entity Name: THE FRIENDS OF THE FORT MYERS BEACH PUBLIC LIBRARY INCORPORATED

Current Principal Place of Business:

2755 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

2755 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 65-0373229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUMAR, JEANIE M
16590 PATRIDGE PLACE RD #203
FORT MYERS, FL 33908 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: T () Delete
Name: ZUMAR, JEANIE
Address: 16590 PATRIDGE PL RD #203
City-St-Zip: FORT MYERS, FL 33908 US

Title: VP () Delete
Name: WILLIAMS, PHYLLIS
Address: 15361 THORNTON RD.
City-St-Zip: FORT MYERS, FL 33908 US

Title: VP () Delete
Name: LACHAPPELLE, SYLVIA
Address: 601 E STORE BLVD
City-St-Zip: FT MYERS BEACH, FL 33931 US

Title: S () Delete
Name: MANGAN, ELIZABETH
Address: 7700 ESTERO BLVD #301
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: P () Delete
Name: SMITH, KATHLEEN
Address: 5711 LANDER STREET
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: D () Delete
Name: COLES, JAMES A
Address: 6970 KIMBERLY TER SW
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: JEANIE ZUMAR

T

01/04/2008

Electronic Signature of Signing Officer or Director

Date