

2000 UNIFORM BUSINESS REPORT (UBR)

4/

FILED

May 09, 2000 8:00 am
Secretary of State

04-14-2000 90074 004 ****61.25

DOCUMENT # N94000001969

1. Entity Name

THE FRIENDS OF THE BIG PINE KEY LIBRARY, INC.

Principal Place of Business

Mailing Address

BIG PINE KEY LIBRARY
213 KEY DEER BLVD
BIG PINE KEY FL 33043
US

P O BOX 1811
213 KEY DEER BLVD
BIG PINE KEY FL 33043-4905
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

65-0480681

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

~~YORDE, LINDA~~
~~155 NW AIRPORT DR~~
~~SUMMERLAND KEY FL 33042~~

^{PO} LEAH CAMP
30632 WINIFRED ST.
BIG PINE KEY, FL 33043

Name LEAH CAMP

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

30632 WINIFRED ST.

BIG PINE KEY, FL 33043

City

FL

Zip Code 33043

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 SD
STREET ADDRESS MANNILLO, GRACE
CITY-ST-ZIP 1506 SUNRISE DR.
BIG PINE KEY FL 33043 ☐ Delete

TITLE
NAME PO LEAH CAMP ☐ Change ☐ Addition
STREET ADDRESS 30632 WINIFRED ST.
CITY-ST-ZIP BIG PINE KEY, FL. 33043

TITLE
NAME D
STREET ADDRESS LAWRENCE, ANTHONY
CITY-ST-ZIP 11111 OCEAN DR.
SUMMERLAND KEY FL ☒ Delete

TITLE
NAME DR RALPH CLOSE ☒ Change ☐ Addition
STREET ADDRESS 151 W. INDIES DRIVE
CITY-ST-ZIP RAMROD KEY, FL 33042

TITLE
NAME PD
STREET ADDRESS YORDE, LINDA
CITY-ST-ZIP P O BOX 420642
SUMMERLAND KEY FL 33042 ☒ Delete

TITLE
NAME D STEVE MILLER ☒ Change ☐ Addition
STREET ADDRESS 29245 OLEANDER DRIVE
CITY-ST-ZIP BIG PINE KEY FL 33043

TITLE
NAME DV
STREET ADDRESS BILLENS, MARGE
CITY-ST-ZIP 30982 BAILEYS LN
BIG PINE KEY FL 33043 ☐ Delete

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

TITLE
NAME D
STREET ADDRESS MULLIGAN, MARY
CITY-ST-ZIP 20953 7TH AVE WEST
CUDJOE KEY FL ☐ Delete

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

TITLE
NAME D
STREET ADDRESS MILLENBRUCH, BARBARA
CITY-ST-ZIP 29169 TULIP LN
BIG PINE KEY FL ☒ 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:

GRACE MANNILLO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/00

305-872-2418
Daytime Phone #

CR2E037 (9/99)