2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N94000003921

Entity Name: FRIENDS OF MID-COUNTY REGIONAL LIBRARY, INC.

Current Principal Place of Business:

2050 FORREST NELSON BLVD
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

2050 FORREST NELSON BLVD
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 65-0519000 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATTESON, ANGELYN H
2050 FORREST NELSON BLVD
PORT CHARLOTTE, FL 33952 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: PD ( ) Delete
Name: MCCOMBS, DIANNE M
Address: 3907 MADRID COURT
City-St-Zip: PUNTA GORDA, FL 33950

Title: S ( ) Delete
Name: NEILL, CECIL
Address: 1063 LIVE OAK CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: T ( ) Delete
Name: BESSIRE, OLIVIA
Address: 2796 AUBURN BLVD
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VPD ( ) Delete
Name: HEURLIN, KIMBERELY
Address: 3918 MIDRID COURT
City-St-Zip: PORT CHARLOTTE, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MUNSON, DIANNE MARIE
Address: 3907 MADRID COURT
City-St-Zip: PUNTA GORDA, FL 33950

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

Title: T (X) Change ( ) Addition
Name: STUMPE, MARY
Address: 1273 RED OAK LANE
City-St-Zip: PORT CHARLOTTE, FL 33948

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: DIANNE MARIE MUNSON PD 04/08/2009

Electronic Signature of Signing Officer or Director — Date