2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9500000095 Jul 10, 2000 8:00 am **Secretary of State** FRIENDS OF THE WILDWOOD LIBRARY, INC. 07-10-2000 90012 015 ****61.25 Principal Place of Business Mailing Address 702 WEBSTER ST 702 WEBSTER ST WILDWOOD FL 34785 WILDWOOD FL 34785-3829 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 59-3262527. Not Applicable Country \$8.75 Additional Zip _ __ Country___ 5. Certificate of Status Desired - -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) HEROY, EVELYN 38 MAGNOLIA LN WILDWOOD FL 34785 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9.- Election Campaign Financing Make Check Payable to NOW: \$5.00 May Be \Box Trust Fund Contribution. Department of State Added to Fees \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ALL, ChARLOTTE ALLE Change TITLE TITLE Delete FLAHERTY, MARY LOU NAME SLAZY HOLLOW WILDWOOD, 7L. 34785 NAME CR2E037 STREET ADDRESS STREET ADDRESS 1212 SAN JUAN DRIVE CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL 32159 TITLE JEAN, WEDDLE DV Delete TITLE BAKER, SHIRLEY M NAME # WEST QUAIL NAME STREET ADDRESS STREET ADDRESS 1516 LAVACA LANE WILDWOOD, 7L 34785 CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL 32159 PEARL, STEINMETZ 58 N. Bobwhite Rd. Change T TITLE ☐ Delete TITLE DI RITO, BLANCHE NAME NAME STREET ADDRESS 13 HICKORY HEAD HAMMOCK STREET ADDRESS Wildwood, 71. 34785 CITY-ST-ZIP CITY-ST-ZIP LADY LAKE FL 32159 Change Addition ☐ Delete and Wallace TITLE MOODY, KATHRY L NAME STREET ADDRESS 112 N TIMBER TRAINL STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WILDWOOD FL 34785 ☐ Change ☐ Addition Defete TITLE TITLE COX. MAXINE NAME STREET ADDRESS STREET ADDRESS 4914 CR 117A CITY-ST-7IP CITY-ST-ZIP WILDWOOD FL 34785 Change ☐ Addition ☐ Delete DRE TITLE ALLEN, RONALD NAME NAME STREET ADDRESS STREET ADDRESS 5000 ST CLAIR ST CITY-ST-ZIP CITY-ST-ZIP WILDWOOD FL 34785 12. I hereby certify that the information supplied with this tiling does not quality 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:



June 6, 2000

FRIENDS OF THE WILDWOOD LIBRARY, INC. 702 WEBSTER ST WILDWOOD, FL 34785

Subject: FRIENDS OF THE WILDWOOD LIBRARY, INC.

Reference Number: N9500000095

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/SP ANNUAL REPORTS SECTION