2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N95000003242

Entity Name: FRIENDS OF THE ROBERT MORGADE LIBRARY, INC.

Current Principal Place of Business:

5851 SE COMMUNITY DRIVE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

5851 SE COMMUNITY DRIVE
STUART, FL 34997

New Mailing Address:

FEI Number: 65-0598408 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUETENS, ERIC D
381 SW TIMBER TRAIL
STUART, FL 34997 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:	DP	( ) Delete
Name:	BUETENS, ERIC D	
Address:	381 SW TIMBER TR	
City-St-Zip:	STUART, FL 34997	
Title:	D	( ) Delete
Name:	ANDERSON, EFFIE D	
Address:	7603 FIELD ST	
City-St-Zip:	STUART, FL 34997	
Title:	DV	( ) Delete
Name:	SYSTROM, CYNTHIA	
Address:	5868 SE RIVERBOAT DRIVE	
City-St-Zip:	STUART, FL 34997 US	
Title:	D	( ) Delete
Name:	ASSELIN, ELLEN A	
Address:	5181 SE KINGFISH AVE	
City-St-Zip:	STUART, FL 34997	
Title:	DS	( ) Delete
Name:	WARNE, LINDA	
Address:	1536 CYPRESS GLEN WY	
City-St-Zip:	STUART, FL 34997	
Title:	DT	( ) Delete
Name:	PETERSEN, GWEN	
Address:	370 NE EDGEWATER DRIVE, #402	
City-St-Zip:	STUART, FL 34996 US	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: ERIC D. BUETENS PRES 04/15/2009

Electronic Signature of Signing Officer or Director — Date