

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2003 8:00 am
Secretary of State

03-11-2003 90134 040 ****61.25

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1. Entity Name

FRIENDS OF THE PALM SPRINGS LIBRARY, INC.



Principal Place of Business

**217 CYPRESS LANE
PALM SPRINGS FL 33461-1698**

Mailing Address

**217 CYPRESS LANE
PALM SPRINGS FL 33461-1698**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0733513**

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

**ROMEO, ELENA
217 CYPRESS LANE
PALM SPRINGS FL 33461-1698**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Elena Romeo, Director

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/7/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **BECAK, THALIA**
STREET ADDRESS **500 DAVIS ROAD, #39**
CITY-ST-ZIP **PALM SPRINGS FL 33461**

TITLE **D** ☒ Change ☐ Addition
NAME **Becak, Thalia**
STREET ADDRESS **4717 Rainbow Drive**
CITY-ST-ZIP **Greenacres, FL 33463**

TITLE **D** ☒ Delete
NAME **GARDENER, JAYNE**
STREET ADDRESS **245 POE DRIVE**
CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE **D/T** ☐ Change ☒ Addition
NAME **Banning, Jeannette**
STREET ADDRESS **345 Henthorne Drive**
CITY-ST-ZIP **Palm Springs, FL 33461**

TITLE **D** ☐ Delete
NAME **ROMEO, ELENA**
STREET ADDRESS **217 CYPRESS LANE**
CITY-ST-ZIP **PALM SPRINGS FL 33461**

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

TITLE **D** ☐ Delete
NAME **BREHM, FRED**
STREET ADDRESS **333 EMERSON CIR.**
CITY-ST-ZIP **PALM SPRINGS FL 33461**

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

TITLE **D** ☐ Delete
NAME **WALTER, KOCH**
STREET ADDRESS **224 SPRINGDALE CIRCLE**
CITY-ST-ZIP **PALM SPRINGS FL 33461**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Elena Romeo

Elena Romeo

3/7/03

(561) 965-2204

CR2E037 (10/02)