2001 UNIFORM BUSINESS REPORT (UBR)

1

FILED
Feb 19, 2001 8:00 am
Secretary of State
01-27-2001 90064 041 ****61.25

DOCUMENT # N96000006505

1. Entity Name

FRIENDS OF THE SUNTREE-VIERA PUBLIC LIBRARY, INC

Principal Place of Business	Mailing Address
335 PINEDA CT MELBOURNE FL 32940	335 PINEDA CT MELBOURNE FL 32940

DO NOT WRITE IN THIS SPACE

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 59-3450139 ☐ 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
KOTZEN, TERRY 274 OAK HAVEN DR MELBOURNE FL 32940	Name PHILIP SWATEK Street Address (P.O. Box Number is Not Acceptable) 577 SPRING LAKE DR. City MELBOURNE FL Zip Code 32940

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 Philip Swatek 1/8/01

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 / STREET ADDRESS / CITY-ST-ZIP	V SWATEK, PHIL 577 SPRING LAKE DR MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT PD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KOTZEN, TERRY 274 OAK HAVEN DR. MELBOURNE FL 32940	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WILLIAM MCLAUGHLIN 560 PARKWOOD WAY MELBOURNE, FL 32940	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THOMAS, EDITH 905 WILSHIRE CT MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KOSTOFF, DOROTHY 7550 SALINAS CT MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HANSEN, DDY 125 WOODSIDE DRIVE MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AUSTIN, MARIAN 1008 OSPREY DR MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD	☑ Change ☐ Addition

CR2E037 (10/00)

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: Philip Swatek Philip Swatek 1/16/01 (921) 255-9168

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #