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

DOCUMENT # N9600006505

1. Entity Name



FILED Mar 05, 2003 8:00 am Secretary of State

03-05-2003 90041 002 ****61.25

	SUNTREE-VIERA PUBL	IC LIBHARY, INC						
Principal Place of Busine		Mailing Address						
- 335 PINEDA CT - 335 PINEDA C								
MELBOURNE PL 32990		MILEDOURINE I E 32340						41 441 (44)
2. Principal Place of Business 902 JORDAN BLASS DRWF 902 JORDAN BLASS DR.					1,124,101,013,101,013			11 1111 1111
Suite, Apt. #, etc.		Suite, Apt. #, etc.			x A t CH	ECK HERE IF MAKIN	IG CHANGES	
City & State MELBO	URNE FL	City & State MELBOU		<u></u>	4. FEI Number 59- 3	1450139	No	oplied For ot Applicable
Zip 3 2 4 4 0	Country	32940	Country		5. Certificate of Statu	us Desired	\$8.75 Add Fee Require	
6. Nar	ne and Address of Current Re	gistered Agent			7. Name and Addre	ss of New Registered	d Agent	
		The state of the s	Name	MEI	LAUCHLIN	WILLIAM	Ng	
-HANSEN, DOY-	Street A		P.O. Box Number is Not			-		
125 WOODSIDE D		56	O PARK	moob m	AY			
-MELBOURNE FL 3	2940-		٠,					
, mass	·		City	MEI	LBOURNE	F	L Zip Code	940
	ntity submits this statement for the	ne purpose of changing its re	egistered office or	registere	ed agent, or both, in the	State of Florida. I ar	n familiar with,	and accept
the obligations of reg	istered agent.	r = 0		•				
	W. ha	1 11	_			,	2/18/03	}
SIGNATURE Signature by	ped or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signate	i ure required	when reinstating)	DATE		
3								
		9. Election Camp	paign Financing	r	\$5.00 May Be	Make Che	ck Payable	to
FILE NO	W: FEE IS \$61.25	Trust Fund Co			Added to Fees	Florida Depa		
							DIOCOTO DO IN	
10.	OFFICERS AND DIRE		11.		ADDITIONS/CHANGES	TO OFFICERS AND I	Change	Addition 8
TITLE TVPD	GHLIN, WILLIAM	☐ Delete	TITLE NAME	P	ט		Cuange	☐ Mudilion 6
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	JRNE FL 32940							i
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		□ Delete	CITY-ST-ZIP	1 1 1	PD		∑ Change	Addition
	Y, FRANK	☐ Delete		170	PD		▼ Change	Addition
STREET ADDRESS 427 TIM	Y, FRANK BERLAKE	☐ Delete	CITY-ST-ZIP	171	PD		▼ Change	Addition
CITY-ST-ZIP MELBOL	•	☐ Delete	CITY-ST-ZIP TITLE NAME	1VI	PD			
CITY-ST-ZIP MELBOU	BERLAKE JRNE FL 32940	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS _CITY-ST_ZIP TITLE	با عداد	***		Change	☐ Addition
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CITY-ST-ZIP MELBOL TITLE SVPD- NAME STREET ADDRESS H414-0\ TITLE SD NAME KOSTOR	BERLAKE JRNE FL 32940 THY, MAC (PRESS TRACES DR	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS _CITY-ST_ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	svp Tho	od omas, Edith 3 Renaissance		⊠ Change	Addition
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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 epopoyered.

Melbourne, FL 32940

SIGNATURE:

HELBOURNE FL 32940

LINE EWILLIAM MILAUGHLIN

321 2550618