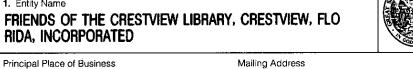
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800000630



FILED Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90110 016 ****61.25

1. Littly Name	
FRIENDS OF THE CRESTVIEW LIBRARY, CRE	estview, flo
RIDA, INCORPORATED	



805 HIGHWAY 90 EAST PO BOX 1972 CRESTVIEW FL 32539 CRESTVIEW FL 32536								8 48181 18141 PS111 BB111 BB111	1 20 (+) 20 +) 10	110 BIIOB III	110 AMIS (AA)			
2. Principal Place of Business /445 Commerce Dr. 3. Mailing Address			Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES							
City & State			City & State					4. FEI Number 59-3491763 Applied For Not Applicab				,		
Zip		Country	` .			ıntry		5. Certificate of Status Desired				itional		
	6. Name	and Address of Current F	Registered A		<u>-</u> .	1	7. Name and Address of New Registered Agent							
				<u> </u>		Name								
LEMBECK, FLORENCE A 6304 POSSUM RIDGE RD				Street Address (P.O. Box Number is Not Acceptable)										
-	EW FL 3253										••			
						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 Slavence A. Lembeck Florence A. Lembeck President 6 Jan 2003														
	Signature, typed	or printed name of registered agent a	nd title if applicat	ole. (NOTE	Registere	d Agent signal	ure required	when reirfstating)	1	DAJÆ.				
FILE NOW: FEE IS \$61.25 9. Election Campai Trust Fund Contr					-		\$5.00 May Be Added to Fees		Check Pa Departme	•				
10.		OFFICERS AND DIR	ECTORS 11.				Α	DDITIONS/CHAI	NGES TO OFFICERS	AND DIREC	TORS IN	10		
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CITY-ST-ZIP		W FL 32539			CITY	-ST-ZIP								
TITLE	٧			☐ Delete	TITLE						Change	☐ Addition		
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NAME	ROGERS,				NAM									
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STREET ADDRESS	105 KIPLIN	ng dr.				ET ADDRESS	120	b berand	view Dr.	140		;		
CITY-ST-ZIP	CRESTVIE	W FL 32539			CITY	-ST-ZIP	Cre	STVICE	u, FL 325	39				

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.

Florence A. Lembeck & Jan. SIGNATURE: