2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# N98000002690

Entity Name: FRIENDS OF LIBERTY COUNTY PUBLIC LIBRARY, INC.

Current Principal Place of Business:

537 SOUTH HIGHWAY 12
BRISTOL, FL 32321

New Principal Place of Business:

Current Mailing Address:

14043 NW CR 12
BRISTOL, FL 323210697

New Mailing Address:

FEI Number: 59-2975015 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, JOE
RT.1 BOX 67D (BLUE CREEK ROAD)
HOSFORD, FL 32334 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: DC ( ) Delete
Name: PICKRON, BOBBY
Address: HWY 125 P.O. BOX 243
City-St-Zip: BRISTOL, FL 32321

Title: DVC ( ) Delete
Name: MORAN, JACK
Address: RT 1 BOX 103
City-St-Zip: BRISTOL, FL 32321

Title: DS ( ) Delete
Name: TANNER, FONDA
Address: RT 3 BOX 266
City-St-Zip: BRISTOL, FL 32321

Title: DT ( ) Delete
Name: KEENAN, TOM
Address: 14043 NW CR 12
City-St-Zip: BRISTOL, FL 32321

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:

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: THOMAS A. KEEAN, T 01/28/2009

Electronic Signature of Signing Officer or Director — Date