

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 14, 2004 8:00 am
Secretary of State**

01-14-2004 90004 008 ****61.25

DOCUMENT # N98000004735

1. Entity Name
FRIENDS OF THE LANTANA PUBLIC LIBRARY, INC.



Principal Place of Business
205 W. OCEAN AVE.
LANTANA, FL 33462

Mailing Address
205 W. OCEAN AVE.
LANTANA, FL 33462



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

01062004 Chg-NP CR2E037 (10/03)

Zip

Zip

Country

4. FEI Number
65-1029750

Applied For

Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATCHETT, SIDNEY A
205 W. OCEAN AVE.
LANTANA, FL 33462

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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 NAME STREET ADDRESS CITY-ST-ZIP	V VREELAND, MARIE 1415 W BROONE STREET LANTANA, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V dijunzio, Marine 1202 S. Lake Dr., Apt. 202 Lantana, FL 33462	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILHELM, TERESA 317 SOUTH ATLANTIC DRIVE LANATANA, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gundlach, Kathy 121 Park Lane East Hyperloop, FL 33462	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SPENCE, GINNY 456 PINE VILLA DRIVE LANTANA, FL 33462	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hard, Jane 896 N. Federal Highway, Apt. 432 Lantana, FL 33462	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PATCHETT, SID 3501 ROYAL PALM AVE COCONUT GROVE, FL 33133	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richter, Dorothy 1403 Great Drive Lake Worth, FL 33461	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURNS, JOHN 313 PINWOOD ST LANTANA, FL 33462	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Scarberry, Grace 1127 Sla Pine Way Lantana, FL 33462	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEACH, STAFFORD 421 NORTH ATLANTIC DRIVE LANTANA, FL 33462	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Pezzutto, Piggy 410 N. Atlantic Drive Lantana, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *S.A. Patchett*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 6, 2004 (561) 540-5740

Date

Daytime Phone #