

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S00431

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** FRIENDS OF THE LEON COUNTY PUBLIC LIBRARY GIFT SHOP, INC.

**Current Principal Place of Business:**

200 WEST PARK AVENUE  
TALLAHASSEE, FL 323017716

**New Principal Place of Business:**

**Current Mailing Address:**

2630 CENTENNIAL PLACE  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 59-3033172

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MATLOCK, GEORGE V  
1545 RAYMOND DIEHL RD  
3D FLOOR  
TALLAHASSEE, FL 32317 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: T  
Name: TILCOCK, RACHAEL  
Address: 2630 CENTENNIAL PLACE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: P  
Name: RUPP, LESLIE  
Address: 200 WEST PARK AVE  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RACHAEL TILCOCK

TREA

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date