

2025 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 704062

Entity Name: FRIENDS OF THE VENICE PUBLIC LIBRARY, INC.**Current Principal Place of Business:**300 NOKOMIS AVE., SOUTH
VENICE, FL 34285**Current Mailing Address:**300 NOKOMIS AVE S
VENICE, FL 34285 US**FEI Number:** 59-1027774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANDRA K PRIDEMORE CPA
300 NOKOMIS AVE., SOUTH
VENICE, FL 34285 US*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:** SANDRA K PRIDEMORE

10/06/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name COOKINGHAM, TOBE
Address 300 NOKOMIS AVE., S
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name KOSTROUN, DEBORAH
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name PACHOTA, DONNA
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

Title P
Name KNUDSEN, JANET
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name GELZHEISER, LYNN
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name JO, LAURA
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

Title TREASURER
Name MURPHY, KAREN
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

Title SECRETARY
Name SHIRLEY, HEATHER
Address 300 NOKOMIS AVE S
City-State-Zip: VENICE FL 34285

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

SIGNATURE: KAREN MURPHY

TREASURER

10/06/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name STALFORD, MARGARET
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name RANK, MICHAEL
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name WOLFE, BETTY
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name BACKENS, DENNIS
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name ROMANO, CHARLENE
Address 300 NOKOMIS AVE., SOUTH
City-State-Zip: VENICE FL 34285