

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727783

Entity Name: FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM, INC.**Current Principal Place of Business:**FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM
2351 SE MONTEREY RD
STUART, FL 34996**Current Mailing Address:**FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM
2351 SE MONTEREY RD
STUART, FL 34996 US**FEI Number: 59-6155142****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DUXBURY, JUDY
FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM
2351 SE MONTEREY ROAD
STUART, FL 34996 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: JUDY DUXBURY****03/13/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	DUXBURY, JUDY
Address	FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM 2351 SE MONTEREY ROAD
City-State-Zip:	STUART FL 34996

Title	SECRETARY
Name	CROY, KELLY
Address	FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM 2351 SE MONTEREY ROAD
City-State-Zip:	STUART FL 34996

Title	PRESIDENT
Name	LEACH, SHEILA
Address	FRIENDS OF THE MARTIN COUNTY LIBRARY SYSTEM, INC. 2351 SE MONTEREY ROAD
City-State-Zip:	STUART FL 34996

Title	VP
Name	TOMASIK, DIANE
Address	2351 SE MONTEREY ROAD
City-State-Zip:	STUART FL 34996

Title	ASST TREASURER
Name	HEINZ, BABS
Address	2351 SE MONTEREY ROAD
City-State-Zip:	STUART FL 34996

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: JUDY DUXBURY**TREASURER****03/13/2025**

Electronic Signature of Signing Officer/Director Detail

Date