2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Mar 03, 2015
Secretary of State
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Entity Name: FRIENDS OF THE CITRUS COUNTY LIBRARY SYSTEM, INC.

Current Principal Place of Business:

2415 N. FLORIDA AVENUE
HERNANDO, FL 34442

Current Mailing Address:

P.O. BOX 1703
HERNANDO, FL 34441-1703 US

FEI Number: 59-3746194

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALEXANDER, JO ANN
8504 E. GLASGOW PLACE
INVERNESS, FL 34450-1714 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VP
Name	HADERER, SUSAN L
Address	1900 W TALL OAKS DR
City-State-Zip:	BEVERLY HILLS FL 34465

Title	PRESIDENT
Name	SLASKA, KAREN
Address	3550 INDIANHEAD RD
City-State-Zip:	HERNANDO FL 34442

Title	SD
Name	GILLEY, BARBARA
Address	2205 N KINGS COVE PT
City-State-Zip:	CRYSTAL RIVER FL 34429

Title	TD
Name	ALEXANDER, JO ANN
Address	8504 E GLASGOW PL
City-State-Zip:	INVERNESS FL 34450-1714

Title	D
Name	PRICE, SANDY
Address	1138 N SHORT LINE WAY
City-State-Zip:	INVERNESS FL 34453

Title	D
Name	DALKALITSIS, MARCIA
Address	2565 S PLEASANT PT
City-State-Zip:	INVERNESS FL 34450

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 SLASKA PRESIDENT 03/03/2015

Electronic Signature of Signing Officer/Director Detail — Date