

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010486

**Entity Name:** FRIENDS OF CALLAHAN PUBLIC LIBRARY, INC.

**FILED**  
**Mar 12, 2014**  
**Secretary of State**  
**CC1460612867**

**Current Principal Place of Business:**

450077 SR 200  
SUITE 15  
CALLAHAN, FL 32011

**Current Mailing Address:**

450077 SR 200  
SUITE 15  
CALLAHAN, FL 32011 US

**FEI Number:** 20-0661172

**Certificate of Status Desired:** No

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

MCCARTY, ALISON  
2833 HERSCHEL ST  
APT# 18  
JACKSONVILLE, FL 32205 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:** ALISON MCCARTY

03/12/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name TOOTHMAN, STEVEN M  
Address 54069 ROY BOOTH RD  
City-State-Zip: CALLAHAN FL 32011

Title VP  
Name BANKS, LOUISE  
Address 54286 HAZEL JONES RD  
City-State-Zip: CALLAHN FL 32011

Title TR  
Name TOOTHMAN, SHERRY  
Address 54069 ROY BOOTH ROAD  
City-State-Zip: CALLAHAN FL 32011

Title TR  
Name EDENFIELD, HOLLY  
Address 54131 HERON ROAD  
City-State-Zip: CALLAHAN FL 32011

Title SEC  
Name ROYSE, CLAUDINE  
Address 45212 STRATTON RD  
City-State-Zip: CALLAHAN FL 32011

*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:** SHERRY TOOTHMAN

TR

03/12/2014

Electronic Signature of Signing Officer/Director Detail

Date