2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2018
Secretary of State
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Entity Name: FRIENDS OF THE NICEVILLE PUBLIC LIBRARY, INC.

Current Principal Place of Business:

206 N PARTIN DR
NICEVILLE, FL 32578

Current Mailing Address:

206 N PARTIN DR
NICEVILLE, FL 32578

FEI Number: 20-5465457

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCINNIS, C. JEFFREY
909 MAR WALT DR
STE 1014
FT WALTON BEACH, FL 32547-6711 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	D
Name	RILEY, JUDY B
Address	1501 BAYSHORE DR
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	JACKSON, SCOTT
Address	282 WAVA AVENUE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	BISHOP, SHEILA
Address	206 PARTIN DRIVE NORTH
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	HUDSON, MARTHA
Address	106 - H WATER STREET
City-State-Zip:	FORT WALTON BEACH FL 32548

Title	D
Name	MCINNIS, C. JEFFREY
Address	909 MAR WALT DR - STE 1014
City-State-Zip:	FT WALTON BEACH FL 32547

Title	D
Name	WRIGHT, RUDY
Address	124 CANTERBURY CIRCLE
City-State-Zip:	NICEVILLE FL 32578

Title	PRESIDENT
Name	BRUNSON, JENNI
Address	2190 HWY 85 NORTH
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	CORBIN, LANNIE L.
Address	208 PARTIN DRIVE NORTH
City-State-Zip:	NICEVILLE FL 32578

Continues on page 2

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: SHEILA BISHOP D 05/01/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BYRNE, BEVERLY
Address	1449 BAYSHORE DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	SECRETARY
Name	ARPKE, EILEEN
Address	4143 CALLAWAY DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	FLOYD, GARRETT
Address	606 KILCULLEN DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	SLAMAN, AMY
Address	1904 OAK AVENUE
City-State-Zip:	NICEVILLE FL 32578

Title	DIRECTOR
Name	MCNEESE, STATIA
Address	2408 MARTIN DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	JAMES, ANNABELLE
Address	102 LITTLE JOHN COURT
City-State-Zip:	NICEVILLE FL 32578

Title	TREASURER
Name	JOURDAN, HEATHER B
Address	4502 HIGHWAY 20 EAST SUITE A
City-State-Zip:	NICEVILLE FL 32578