2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2015
Secretary of State
CC6784755166

DOCUMENT# N06000000849

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: Yes

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	BRUNSON, TRICIA
Address	1055 E JOHN SIMS PKWY
City-State-Zip:	NICEVILLE FL 32578

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

Title	D
Name	SPENCE, REBECCA
Address	1405-A BAYSHORE DRIVE
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	SUMMERLIN, SCOTT
Address	1020 E. JOHN SIMS PKWY
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	RILEY, JUDY B
Address	1501 BAYSHORE DR
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	BURGER, LISA
Address	4451 WOODBRIDGE ROAD
City-State-Zip:	NICEVILLE FL 32578

Title	D
Name	JACKSON, SCOTT
Address	1655 S. FERDON BLVD
City-State-Zip:	CRESTVIEW FL 32536

Title	D
Name	BISHOP, SHEILA
Address	206 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 K. BISHOP DIRECTOR 01/09/2015

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

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

Title	D
Name	DOWDEN, DAVID
Address	4502 E HWY 20
City-State-Zip:	NICEVILLE FL 32578

Title	DIRECTOR
Name	BYRNE, BEVERLY
Address	1449 BAYSHORE DRIVE
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	CORBIN, LANNIE L.
Address	208 PARTIN DRIVE NORTH
City-State-Zip:	NICEVILLE FL 32578

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