

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37306

**Entity Name:** FRIENDS OF THE LIBRARY-PONTE VEDRA BEACH, INC.**Current Principal Place of Business:**101 LIBRARY BLVD  
PONTE VEDRA BEACH, FL 32082**Current Mailing Address:**P.O. BOX 744  
PONTE VEDRA BEACH, FL 32004 US**FEI Number: 59-2998576****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WILSON, DOUGLAS A  
105 CUELLO CT UNIT 202  
PONTE VEDRA BEACH, FL 32082 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	S
Name	FETHERSTON, GEORGE
Address	P O BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

Title	VP
Name	KELLY, LAURIE
Address	P.O. BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

Title	VP
Name	BRAZIS, LIZ
Address	PO BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

Title	T
Name	WILSON, DOUGLAS A
Address	P.O. BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

Title	P
Name	O'BRIEN, DAVID
Address	P.O. BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

Title	VP
Name	DICARLO, GUY
Address	P O BOX 744
City-State-Zip:	PONTE VEDRA BEACH FL 32004

*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: DOUGLAS A WILSON****TREASURER****02/15/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date