

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006505

Entity Name: FRIENDS OF THE SUNTREE-VIERA PUBLIC LIBRARY, INC.**Current Principal Place of Business:**902 JORDAN BLASS DR
MELBOURNE, FL 32940**Current Mailing Address:**902 JORDAN BLASS DR
MELBOURNE, FL 32940**FEI Number: 59-3450139****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**POTERE, THOMAS P.
3483 CARAMBOLA CIR
MELBOURNE, FL 32940 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: THOMAS POTERE****01/15/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title MRS.
Name MINTON, BETTY 2ND VP
Address 876 MOORHEN CRT.
City-State-Zip: VIERA FL 32955

Title MRS.
Name SHAW, BOBBI 1ST VP
Address 867 OAKWOOD DR..
City-State-Zip: MELBOURNE FL 32940

Title MR.
Name PATWARI, KEN PRES
Address 3454 GUERRERO DR.
City-State-Zip: MELBOURNE FL 32940

Title MRS.
Name NEY, MARTA CORRESPONDING
SECRETARY
Address 1928 CRANE CREEK BLVD
City-State-Zip: MELBOURNE FL 32940

Title MR.
Name POTERE, THOMAS P. TREASURER
Address 3483 CARAMBOLA CIR
City-State-Zip: MELBOURNE FL 32940

Title MRS.
Name JAGER, STEPHANIE RECORDING
SECRETARY
Address 7196 MENDELL WAY
City-State-Zip: MELBOURNE FL 32940

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: THOMAS POTERE**TREASURER****01/15/2018**

Electronic Signature of Signing Officer/Director Detail

Date