

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003708

FILED  
Feb 28, 2007  
Secretary of State

Entity Name: ADVISORY COMMISSION ON TEXTBOOK SPECIFICATIONS, INC.

**Current Principal Place of Business:**

TWO ARMAND BEACH DR SUITE 1B  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

TWO ARMAND BEACH DR SUITE 1B  
PALM COAST, FL 32137

**New Mailing Address:**

FEI Number: 22-3871616      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD - TEAM 1  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: MCKENZIE, SUE  
Address: #4 CAPITOL MALL, ROOM 109-A  
City-St-Zip: LITTLE ROCK, AR 72201

Title: VC ( ) Delete  
Name: DRIESLER, STEPHEN D  
Address: 50 F STREET, SUITE 400  
City-St-Zip: WASHINGTON, DC 20001

Title: DST ( ) Delete  
Name: SMITH, BRUCE W  
Address: 33 EASTLAKE DRIVE  
City-St-Zip: PALM COAST, FL 32137

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VC (X) Change ( ) Addition  
Name: DISKEY, JAY A  
Address: 50 F STREET, SUITE 400  
City-St-Zip: WASHINGTON, DC 20001

Title: DST (X) Change ( ) Addition  
Name: SMITH, BRUCE W  
Address: TWO ARMAND BEACH DR, 1B  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRUCE W. SMITH

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

DST

02/28/2007

\_\_\_\_\_ Date