


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 05, 2007 8:00 am**  
**Secretary of State**

02-05-2007 90106 036 \*\*\*\*61.25

<b>DOCUMENT # N00000005534</b>	
1. Entity Name BORN TO READ, INC.	

Principal Place of Business P O BOX 2410 DAYTONA BEACH, FL 32115	Mailing Address 145 GRANADA ST DAYTONA BEACH, FL 32117
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2. Principal Place of Business - No P.O. Box # 145 Granada St	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Holly Hill FL	City & State
Zip 32117	Country USA



02032007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-3698504	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>
STERLING, JOHN T 145 GRANADA ST DAYTONA BEACH, FL 32117

<b>7. Name and Address of New Registered Agent</b>
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**Filing Fee is \$61.25 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERLING, JOHN 145 GRANADA ST DAYTONA BEACH, FL 32117	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PHILIO, CHER 655 CLYDE MORRIS BLVD., STE A DAYTONA BEACH, FL 32114	<input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STERLING, JEAN 145 GRANADA ST DAYTONA BEACH, FL 32117	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WARNER, SHIRLEY 226 ORMOND DR ORMOND BEACH, FL 32176	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.D Andrew Moore, Andrew 729 Loomis Ave, Title I Daytona Beach FL 32115	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** John T Sterling John T Sterling 2-5-07 386-677-0722  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #