

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 03, 2008
Secretary of State**

DOCUMENT# N07000008985

Entity Name: EVERY CHILD A READER ESCAMBIA, INC.

Current Principal Place of Business:

1708 NORTH 14TH AVENUE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

1708 NORTH 14TH AVENUE
PENSACOLA, FL 32503

New Mailing Address:

P.O. BOX 71
PENSACOLA, FL 32591 00

FEI Number: 26-1200860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARNHAM, JOHN
1708 NORTH 14TH AVENUE
PENSACOLA, FL 32503 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: D () Delete
Name: FRANKLIN, EUGENE
Address: 945 WEST MICHIGAN AVE #12
City-St-Zip: PENSACOLA, FL 32505

Title: CHRD () Delete
Name: PARNHAM, JOHN
Address: 1708 NORTH 14TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

Title: VCHR () Delete
Name: RITCHIE, WALTER J
Address: 40 NORTH PALAFOX STREET
City-St-Zip: PENSACOLA, FL 32502

Title: SD () Delete
Name: GROVE, JENNIFER
Address: ONE ENERGY PLACE
City-St-Zip: PENSACOLA, FL 32520

Title: D () Delete
Name: DELALNO, THOMAS
Address: 1000 COLLEGE BOULEVARD
City-St-Zip: PENSACOLA, FL 32504

Title: TD () Delete
Name: HOSMAN, JOHN
Address: 315 SOUTH BAYLEN STREET
City-St-Zip: PENSACOLA, FL 32502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: DELAINO, THOMAS
Address: 1000 COLLEGE BOULEVARD
City-St-Zip: PENSACOLA, FL 32504

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

I hereby certify that the information supplied with this filing does not qualify 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: KERMIT E. HOUSH

E. D

02/03/2008

Electronic Signature of Signing Officer or Director

_____ Date