2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41284

Entity Name: LEARN TO READ, INC.

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	REN'S WAY				.,		
	VILLE, FL 32207	US					
Current Mailing Address:				New Mailing Address:			
	REN'S WAY VILLE, FL 32207	US					
FEI Number:	23-7153919 F	El Number Applied For()	FEI Nun	nber Not Appli	cable ()	Certificate of Status	Desired ()
Name and	Address of Curr	ent Registered Agent:		Name and	Address of N	lew Registered Ag	ent:
ALGIRE, TERRY ED 917 CHILDREN'S WAY JACKSONVILLE, FL 32207 US				COREY, HEATHER R ED 917 CHILDREN'S WAY JACKSONVILLE, FL 32207 US			
The above in the State		mits this statement for the pu	urpose o	f changing it	s registered o	office or registered a	gent, or both,
SIGNATURE: HEATHER R. COREY				01/26/2006			
	Electronic S	Signature of Registered Ager	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P/D () Del MEIDE, MOSES 817 N. MAIN ST. JACKSONVILLE, FL			Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP/D () Delo ALBEE, HELEN 1139 N. LAURA STF JACKSONVILLE, FL	REET		Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	S () Del MARTIN, MARGO D 2472 BLUFFTON DI JACKSONVILLE, FL	DR. R. W.		Title: Name: Address: City-St-Zip:	()) Change () Addition	
Title: Name: Address: City-St-Zip:	T () Del- CASQUE, CAY 825 WESTMINSTER ORANGE PARK, FL	R DR.		Title: Name: Address: City-St-Zip:	WHEELER, KIN 21 WEST CHUI) Change () Addition vl RCH STREET, T-7 E, FL 32202 US	
Title: Name: Address: City-St-Zip:	VP () Dele POPE, JULIE 1809 ELIZABETH P JACKSONVILLE, FL	L		Title: Name: Address: City-St-Zip:	POPE, JULIE 1809 ELIZABE) Change () Addition TH PL E, FL 32205 US	
Title: Name: Address: City-St-Zip:	D () Del- HORTON, KEN 1366 PINK PANTHE JACKSONVILLE, FL	R DR.		Title: Name: Address: City-St-Zip:	()) Change () Addition	

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: HEATHER R. COREY ED 01/26/2006