2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008
Secretary of State

DOCUMENT# N98000005920

Entity Name: LITERACY TRUST, INC.

Current Principal Place of Business:

106 NW 33RD COURT,
SUITE C
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

3324 W UNIVERSITY AVE
#116
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOOVER, NORA L
10136 SW 52ND RD
GAINESVILLE, FL 32608 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: HOOVER, NORA
Address: 750 SOUTH WEST 91ST STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: D ( ) Delete
Name: SILVERMAN, BENEDICT
Address: 51 SHERMAN HILL RD. BLDG A #A1040 PO DR. C
City-St-Zip: WOODBURY, CT 06798

Title: D ( ) Delete
Name: LOMBARDI, BONNELL M
Address: 20 OLD LITCHFIELD RD.
City-St-Zip: WASHINGTON COUNTY, CT 06793

Title: O ( ) Delete
Name: NIX, BELINDA W
Address: 14418 NW 41ST PLACE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HOOVER, NORA
Address: 10136 SW 52ND ROAD
City-St-Zip: GAINESVILLE, FL 32607

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

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

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: NORA LEE HOOVER PRES 03/20/2008

Electronic Signature of Signing Officer or Director Date