I hereby 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 607, Florida Statutes; and that my name appears				
above, or on an attachment with all other like empowered.				

SIGNATURE: CATHY SPOONE

Electronic Signature of Signing Officer/Director Detail

# 10332 YORKMERE COURT ORLANDO, FL 32817 US FEI Number: 01-0550124

### Name and Address of Current Registered Agent:

SPOONE, CATHY L 10332 YORKMERE COURT ORLANDO, FL 32817 US

10332 YORKMERE COURT ORLANDO, FL 32817

**Current Mailing Address:** 

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

### **Officer/Director Detail :**

Title	P	Title	VP
Name	SPOONE, CATHY	Name	BUCKINGHAM, GREGG
Address	10332 YORKMERE COURT	Address	10332 YORKMERE COURT
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817

Certificate of Status Desired: No

PRESIDENT

# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# P01000119952

### Entity Name: BOOK TREASURES AND EDUCATIONAL SERVICES, INC.

## **Current Principal Place of Business:**

Date