


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
May 01, 2007 08:00 A
Secretary of State

DOCUMENT # F02000000476
 1. Entity Name
 AGORA PUBLISHING, INC.



Principal Place of Business Mailing Address
 14 WEST MOUNT VERNON PLACE 14 WEST MOUNT VERNON PLACE
 BALTIMORE, MD 21201 US BALTIMORE, MD 21201 US

DO NOT WRITE IN THIS SPACE



04252007 No Chg-P CR2E034 (11/05)

4. FEI Number 52-0953737	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KOPLAS, ANN
 235 NE FOURTH AVENUE
 DELRAY BEACH, FL 33483

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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:  CFO **ROBERT COMPTON** 4/30/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	BONNER, WILLIAM
STREET ADDRESS	14 WEST MOUNT VERNON PLACE
CITY - ST - ZIP	BALTIMORE, MD 21201
TITLE	SD
NAME	BARNHILL, GREGORY
STREET ADDRESS	14 WEST MOUNT VERNON PLACE
CITY - ST - ZIP	BALTIMORE, MD 21201
TITLE	TD
NAME	NORIN, MYLES
STREET ADDRESS	14 WEST MOUNT VERNON PLACE
CITY - ST - ZIP	BALTIMORE, MD 21201
TITLE	TD
NAME	BARNHILL, GREGORY
STREET ADDRESS	14 WEST MOUNT VERNON PLACE
CITY - ST - ZIP	BALTIMORE, MD 21201
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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 607, 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:  **ROBERT COMPTON** 4/30/07 410-783-8421
Signature and typed or printed name of signing officer or director Date Daytime Phone #