

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004799

FILED
Mar 19, 2009
Secretary of State

Entity Name: FIRST BOOK INC.

Current Principal Place of Business:

1319 F. STREET, N.W.
STE 1000
WASHINGTON, DC 20004

New Principal Place of Business:

Current Mailing Address:

1319 F. STREET, N.W.
STE 1000
WASHINGTON, DC 20004

New Mailing Address:

FEI Number: 52-1779606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, JANE
1987 SW PALM CITY RD
STUART, FL 34994 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: CFB () Delete
Name: GOLD, PETER MR.
Address: 13640 GLENHURST ROAD
City-St-Zip: NORTH POTOMAC, MD 20878 US

Title: PFB () Delete
Name: ZIMMER, KYLE MS.
Address: 1319 F STREET, NW, SUITE 1000
City-St-Zip: WASHINGTON, DC 20004 US

Title: DIR () Delete
Name: ARKY, ELIZABETH MS.
Address: 800 CONNECTICUT AVE, NW, SUITE 600
City-St-Zip: WASHINGTON, DC 20006 US

Title: DIR () Delete
Name: BLACKSTOCK, NARVEL MR.
Address: 40 MUSIC SQUARE WEST
City-St-Zip: NASHVILLE, TN 37203 US

Title: DIR () Delete
Name: CERF, CHRISTOPHER MR.
Address: 146 EAST 62ND STREET
City-St-Zip: NEW YORK, NY 10021 US

Title: DIR () Delete
Name: EDMUNDS, JR, STERLING MR.
Address: 901SEMMES AVENUE
City-St-Zip: RICHMOND, VA 23224 US

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
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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: KYLE ZIMMER

PFB

03/19/2009

Electronic Signature of Signing Officer or Director

Date