

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J05886

Entity Name: BOOKS OF LOVE, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

4 PAGE RD
DAVENPORT, FL 33837 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2200
DAVENPORT, FL 338362200 US

New Mailing Address:

FEI Number: 59-2741228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOND, PETER C.
6 WEST LEMON
DAVENPORT, FL 33837 US

Name and Address of New Registered Agent:

BOND, AARON P
305 E. LEMON STREET
DAVENPORT, FL 33837 US

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: AARON P. BOND

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOND, BERNYCE M.,
Address: 113 E PALM ST
City-St-Zip: DAVENPORT, FL

Title: D () Delete
Name: BOND, PETER C.,
Address: 6 WEST LEMON ST
City-St-Zip: DAVENPORT, FL

Title: D () Delete
Name: BOND, JUDITH
Address: 1836 N. CRYSTAL LAKE DR. #79
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BOND, BERNYCE M
Address: 113 EAST PALM ST
City-St-Zip: DAVENPORT, FL 33837 US

Title: D (X) Change () Addition
Name: BOND, PETER C
Address: 6 WEST LEMON ST
City-St-Zip: DAVENPORT, FL 33837 US

Title: D (X) Change () Addition
Name: BOND, AARON P
Address: 305 EAST LEMON ST
City-St-Zip: DAVENPORT, FL 33837 US

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

SIGNATURE: AARON P. BOND

D

04/18/2006

Electronic Signature of Signing Officer or Director

Date