## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # K17911 1. Entity Name

BOOKWORLD SERVICES, INC.

Principal Place	of Business	Mailing Address										
1933 WHITFIELD SARASOTA FL 3 US		1933 WHITFIELD PARK LOOP SARASOTA FL 34243 US				1 ( <b>88) 83</b> (1 <b>86</b> ) 11 <b>4</b>	411 1 <b>4 11 1</b> 1 11 11 11 11 11 11	(8): 11(8): 4(8)): 1		ı Bibli bibli	11011 kBBI	
2. Principal Pla	ace of Business	3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State		City & State			4. FE	4. FEI Number 94-1726038					lied For Applicable	
Zip	Country	Zip	Country		5. C	ertificate of St	atus Desired			75 Addit		
	6. Name and Address of Current	Registered Agent	L		7 N:	ame and Add	ress of New	Registere				
SMITH, NANCY E 4519 51ST STREET, EAST BRADENTON PL 34203  1933 Whitfield Park Loop Sarasota, FL 34243				Name Street Address (P.O. Box Number is Not Acceptable)								
										·		
				City	FL Zip Code							
	named entity submits this statement fo	r the purpose of changing its	registered	office or re	gistered age	ent, or both, in	the State of F	Florida.				
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered A	gent signature n	equired when rei	instating)		DATI	E			
	ration is eligible to satisfy its Intangible equirement and elects to do so. la on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.0 Make Check Payable to Department of \$550.00					n Campaign F und Contribut				May Be to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADI	DITIONS/CHA	NGES TO OF	FFIÇERS A	ND DIF	RECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SMITH, RON T. 1933 Whitfield Park Loop 4519-51 ST. E. Sarasota, FL 34243		TITLE NAME STREET CITY-SI	ADDRESS 1-ZIP						Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D SMITH, NANCY E. 1933 White	Delete Delete State Loop	TITLE NAME STREET CITY-S	AODRESS I-ZIP						Change	Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP					_	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME, STREET CITY-S	ADDRESS T-ZIP						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	ADDRESS ST-ZIP						] Change	☐ Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an addyss, with all other like empowered.

NANCY E SMITH

CR2E034 (10/00)