2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N01000000378 03-15-2005 90032 018 ****61.25 PRISON BOOK PROJECT, INC. Principal Place of Business Mailing Address 3880 S. WASHINGTON AVE. 0.0. BOX 1146 SHARPES, FL 32959 US #154 TITUSVILLE, FL 32780 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03092005 Chg-NP CR2E037 (10/03) Applied For City & State City & State 4. FEI Number 59-3506589 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HALL, RAYMOND Street Address (P.O. Box Number is Not Acceptable) 4050 SONG DR COCOA, FL 32927 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing **\$5.00** May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11 TIFLE D BC ☐ Delete TIT1 F ☐ Change **▼** Addition GRAY, LOWELL NAME NAME Fredrick F. Foote 2580 WHITE OAK DR STREET ADDRESS STREET ADDRESS 1511 Guldahl Dr. CITY-ST-ZIP TITUSVILLE, FL 32780 CITY-ST-ZIP Titusville, Fla. D ☐ Change TITLE ☐ Delete TITLE ★ Addition MAZE, PAUL NAME NAME Joel Shealy 1507 VISTA TERRACE STREET ADDRESS STREET ADDRESS 2644 Baywood Drive CITY-ST-ZIP TITUSVILLE, FL 32780 CITY-ST-ZIP Titusville, Fl. 32780 Change TITLE □ Detete TITLE ☐ Addition BROOME, CHRIS NAME NAME STREET ADDRESS STREET ADDRESS 915 S. WASHINGTON AVE TITUSVILLE, FL 32780 CITY-ST-ZIP CITY-ST-ZIP STD ☐ Change Addition TITLE - Delete TIT) F HALL, KAZUKO NAME NAME STREET ADDRESS 4050 SONG DR. STREET ADDRESS CITY-ST-ZIP COCOA, FL 32927 CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE COON, TERRY NAME NAME STREET ADDRESS 4101 HEMLOCK LANE STREET ADDRESS CITY-ST-7IP TITUSVILLE, FL 32780 COY-ST-7P TITLE Delete TITLE ☐ Change ☐ Addition NAME BROWN, MIKE NAME 1720 MISTY WAY STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 617, 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.

CITY-ST-ZIP

SIGNATURE:

TITUSVILLE, FL 32780

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

_March_11th, 2005 321 269 4100

FILED

Mar 15, 2005 8:00 am