

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90032 027 ****69.00

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1. Entity Name

PRISON BOOK PROJECT, INC.



Principal Place of Business

3880 S. WASHINGTON AVE.
#154
TITUSVILLE FL 32780
US

Mailing Address

O.O. BOX 1146
SHARPES FL 32959
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3506589

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

HALL, RAYMOND
4050 SONG DR
COCOA FL 32927

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GRAY, LOWELL
STREET ADDRESS 2580 WHITE OAK DR
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☒ Delete
NAME MAZE, PAUL
STREET ADDRESS 1507 VISTA TERRACE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☒ Delete
NAME BROOME, CHRIS
STREET ADDRESS 915 S. WASHINGTON AVE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete
NAME FOOTE, FREDERICK F
STREET ADDRESS 1511 GULDAHL DR.
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete
NAME COON, TERRY
STREET ADDRESS 4101 HEMLOCK LANE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete
NAME SHEALY, JOEL
STREET ADDRESS 2644 BAYWOOD DRIVE
CITY-ST-ZIP TITUSVILLE FL 32780

11.

TITLE D
NAME Thornton, Jim
STREET ADDRESS 2825 Starlight Drive
CITY-ST-ZIP Titusville, Fla. 32796

TITLE STD
NAME Hall, Kazuko
STREET ADDRESS 4050 Song Drive
CITY-ST-ZIP Cocoa, Fla. 32927

TITLE D ☐ Change ☐ Addition
NAME Matteson, Dean
STREET ADDRESS 4930 Squires Dr.
CITY-ST-ZIP Titusville, FL 32780

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-321-269-4100