

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009706

FILED
Jan 16, 2009
Secretary of State

Entity Name: ROLLING READERS SPACE COAST, INC.

Current Principal Place of Business:

1948 PINEAPPLE AVE
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

1948 PINEAPPLE AVE
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3755192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TSAMOUTALES, NICHOLAS F
5240 BABCOOK ST. N.E., SUITE 210
PALM BAY, FL 32905 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: PD () Delete
Name: BACCUS, SHIRLEY P
Address: 300 ATLANTIC ST
City-St-Zip: MELBOURNE, FL 32951

Title: SD () Delete
Name: BORDERS, JOAN R
Address: 10440 S TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD () Delete
Name: CORDELL, PAULINE P
Address: 840 HUNTINGTON ST NE
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: EASON, MARY C
Address: 1104 CHEYENNE DR
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: D () Delete
Name: LORIS, TIFFANY CREWS
Address: 5430 VILLAGE DR SUITE 102
City-St-Zip: VIERA, FL 32955

Title: 1VPD () Delete
Name: BECHTEL, BOBBY
Address: 829 INDIAN RIVER DR.
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BORDERS, JOAN R
Address: 727 PALOS VERDE DR.
City-St-Zip: SATELLITE BEACH,, FL 32952

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
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: PAULINE P. CORDELL

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date