

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004704

FILED  
Apr 18, 2009  
Secretary of State

Entity Name: BOOKS ALL AROUND, INC.

## Current Principal Place of Business:

2801 COLLEGE AVE. #7  
BERKELEY, CA 94705

## New Principal Place of Business:

208 VILLAGE GLEN WAY  
MOUNT HOLLY, NC 28120

## Current Mailing Address:

2801 COLLEGE AVE. #7  
BERKELEY, CA 94705

## New Mailing Address:

208 VILLAGE GLEN WAY  
MOUNT HOLLY, NC 28120

FEI Number: 20-2831482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, SHEVRIN  
4702 SW 23RD STREET  
WEST PARK, FL 33023 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: DCEO ( ) Delete  
Name: GRAHAM, DARIUS A  
Address: 2801 COLLEGE AVE. #7  
City-St-Zip: BERKELEY, CA 94705

Title: D ( ) Delete  
Name: HEYWARD, ELIJAH  
Address: 2407 PINE COURT NORTH  
City-St-Zip: BEAUFORT, SC 29902

Title: D ( ) Delete  
Name: HOLLOWAY, BERNARD  
Address: 2709 WOODLAKE ROAD  
City-St-Zip: MITCHELLVILLE, MD 20721

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition  
Name: GRAHAM, DARIUS A  
Address: 208 VILLAGE GLEN WAY  
City-St-Zip: MOUNT HOLLY, NC 28120

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: DARIUS A. GRAHAM

DCEO

04/18/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date