

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005170

FILED  
Sep 05, 2007  
Secretary of State

Entity Name: READING 4 LIFE INCORPORATED

**Current Principal Place of Business:**

726 1/2 41 STREET  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

726 1/2 41 STREET  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

PHILLIPS, CHRISTINA  
726 1/2 41 STREET  
WEST PALM BEACH, FL 33407 US

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: P ( ) Delete  
Name: PHILLIPS, CHRISTINA  
Address: 726 1/2 STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: V ( ) Delete  
Name: PHILLIPS, ANTRUE  
Address: 7614 194TH STREET CT E  
City-St-Zip: SPANAWAY, WA 98387

Title: ST ( ) Delete  
Name: PHILLIPS, BRANDI  
Address: 15303 103RD AVE  
City-St-Zip: PUYALLUP, WA 98374

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: CHRISTINA PHILLIPS

P

09/05/2007

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

\_\_\_\_\_  
Date