

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000009813

1. Entity Name
REACH & TEACH: BIBLE STUDY CLUB INC



Principal Place of Business

**2522 W DIANA ST
TAMPA, FL 33614**

Mailing Address

**2522 W DIANA ST
TAMPA, FL 33614**

DO NOT WRITE IN THIS SPACE



04262008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
20-3718774

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 33612-3425**

**DO NOT WRITE
IN THIS SPACE**

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 renewing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000942837
05/29/08-80037-009 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST- ZIP	D VARGAS, MAYRA 2522 W DIANA ST TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D GONZALEZ, GRETTEL LAURA 2522 W DIANA ST TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST- ZIP	T AVILA, ANGIE 2522 W DIANA ST TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S CHAVEZ, OLGA LUCIA 2522 W DIANA ST TAMPA, FL 33614
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mayra Vargas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/08
Date

8139312504
Daytime Phone #