

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011274

FILED  
May 01, 2006  
Secretary of State

Entity Name: BREAD TO THE NATIONS INC .

## Current Principal Place of Business:

428 PASAJE AVENUE  
TARPON SPRINGS, FL 34689

## New Principal Place of Business:

## Current Mailing Address:

428 PASAJE AVENUE  
TARPON SPRINGS, FL 34689

## 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:

ZADEH, NAUSSERA N  
428 PASAJE AVENUE  
TARPON SPRINGS, FL 34689 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: P ( ) Delete  
Name: ZADEH, NAUSSERA N  
Address: 428 PASAJE AVE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: S ( ) Delete  
Name: BONO, KATHLEEN  
Address: 4809 GRAND BLVD.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: BONO, JOSEPH  
Address: 641 VALENCIA DRIVE  
City-St-Zip: BELLEVILLE, IL 62223

Title: D ( ) Delete  
Name: GRAY, DAVID  
Address: 6219 US 19 NORTH  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: HOLLANDER, JEFFREY  
Address: PO BOX 15268  
City-St-Zip: BROOKSVILLE, FL 34604

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition  
Name: BONO, KATHLEEN  
Address: 4809 GRAND BLVD. #12  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change ( ) Addition  
Name: BONO, JOSEPH  
Address: 641 VALENCIA DRIVE  
City-St-Zip: BELLEVILLE, IL 62223

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

Title: D (X) Change ( ) Addition  
Name: JOHN, JOSEPH M REV  
Address: 3046 BIRKDALE DRIVE  
City-St-Zip: HOLIDAY, FL 34690

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN BONO

S

05/01/2006

Electronic Signature of Signing Officer or Director

Date