

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 30, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90036 019 \*\*\*\*61.25

<b>DOCUMENT # N06000013069</b> 1. Entity Name <b>BRIDGING THE ACHIEVEMENT GAP, INC.</b>																													
Principal Place of Business 13255-118TH ST NO. LARGO, FL 33778				Mailing Address 13255-118TH ST NO. LARGO, FL 33778																									
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State																											
Zip	Country	Zip	Country	02132007 Chg-NP CR2E037 (12/06)																									
4. FEI Number <div style="font-size: 1.2em; font-family: monospace;">20-8626819</div>				Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent  <b>FEAZELL, JAMES E SR</b> <b>11760-129TH AVE NO</b> <b>LARGO, FL 33778</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>																									
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reappointing)</small> <div style="text-align: right;"><small>DATE</small></div>																													
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																									
<b>Make check payable to Florida Department of State</b>																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; font-size: 0.8em;">TITLE</td> <td style="width: 65%;">D</td> <td style="width: 20%; text-align: right;">Delete</td> </tr> <tr> <td style="font-size: 0.8em;">NAME</td> <td>FEAZELL, JAMES</td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">STREET ADDRESS</td> <td>11760-129TH AVE NO</td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">CITY-ST-ZIP</td> <td>LARGO, FL 33778</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; font-size: 0.8em;">TITLE</td> <td style="width: 65%;">Change</td> <td style="width: 20%; text-align: right;">Addition</td> </tr> <tr> <td style="font-size: 0.8em;">NAME</td> <td></td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	D	Delete	NAME	FEAZELL, JAMES		STREET ADDRESS	11760-129TH AVE NO		CITY-ST-ZIP	LARGO, FL 33778		TITLE	Change	Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	D	Delete																											
NAME	FEAZELL, JAMES																												
STREET ADDRESS	11760-129TH AVE NO																												
CITY-ST-ZIP	LARGO, FL 33778																												
TITLE	Change	Addition																											
NAME																													
STREET ADDRESS																													
CITY-ST-ZIP																													
TITLE	D	Delete																											
NAME	FEAZELL, GWEN																												
STREET ADDRESS	11760-129TH AVE NO																												
CITY-ST-ZIP	LARGO, FL 33778																												
TITLE	D	Delete																											
NAME	MCCLENDON, WILLIE																												
STREET ADDRESS	12720-118TH ST NO.																												
CITY-ST-ZIP	LARGO, FL 33778																												
TITLE	D	Delete																											
NAME	THORNTON, BARBARA																												
STREET ADDRESS	755-CAYA COSTA COURT NE																												
CITY-ST-ZIP	ST PETERSBURG, FL 33702																												
TITLE	D	Delete																											
NAME	STEPHENS, SOLOMON																												
STREET ADDRESS	2601-59TH AVE SO																												
CITY-ST-ZIP	ST PETERSBURG, FL 33712																												
TITLE	D	Delete																											
NAME	MCGARRAH, LILLIE																												
STREET ADDRESS	13637-120TH NO																												
CITY-ST-ZIP	LARGO, FL 33778																												

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:** *James E. Feazell Jr.* Jul 14 2007 586-4082  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date  
Daytime Phone