

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013069

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** BRIDGING THE ACHIEVEMENT GAP, INC.

**Current Principal Place of Business:**

11760 - 129TH AVE. NO.  
LARGO, FL 33778

**New Principal Place of Business:**

13255 - 118TH ST. NO.  
LARGO, FL 33778

**Current Mailing Address:**

11760 - 129TH AVE. NO.  
LARGO, FL 33778

**New Mailing Address:**

**FEI Number:** 20-8626819

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEAZELL, JAMES E SR  
11760-129TH AVE NO  
LARGO, FL 33778 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: D ( ) Delete  
Name: FEAZELL, JAMES  
Address: 11760-129TH AVE NO  
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete  
Name: FEAZELL, GWEN  
Address: 11760-129TH AVE NO  
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete  
Name: MCCLENDON, WILLIE  
Address: 12720-118TH ST NO.  
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete  
Name: THORNTON, BARBARA  
Address: 755-CAYA COSTA COURT NE  
City-St-Zip: ST PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: STEPHENS, SOLOMON  
Address: 2601-59TH AVE SO  
City-St-Zip: ST PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: MCGARRAH, LILLIE  
Address: 13637-120TH NO  
City-St-Zip: LARGO, FL 33778

**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:

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: JAMES FEAZELL

D

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date