

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30620

FILED
Feb 17, 2009
Secretary of State

Entity Name: READ PINELLAS, INC.

Current Principal Place of Business:

400 CHESTNUT STREET
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

400 CHESTNUT STREET
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-2962210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAYMOND, PATTI
400 CHESTNUT STREET
OLDSMAR, FL 34677 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: DP () Delete
Name: GODFREY, PAULA
Address: 1330 CLEVELAND STREET
City-St-Zip: CLEARWATER, FL 33755

Title: T () Delete
Name: RAYMOND, PATTI
Address: 400 CHESTNUT STREET
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: TAYLOR, SHARON
Address: 14239 DICKEY ROAD
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: SARGENT, LAURA
Address: 11142 55TH AVE N
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SARGENT, LAURA
Address: 301 4TH STREET SW
City-St-Zip: LARGO, FL 33770 US

Title: T (X) Change () Addition
Name: RAYMOND, PATTI
Address: 400 CHESTNUT STREET
City-St-Zip: OLDSMAR, FL 34677 US

Title: D (X) Change () Addition
Name: TAYLOR, SHARON
Address: 14239 DICKEY ROAD
City-St-Zip: PARRISH, FL 34219 US

Title: D (X) Change () Addition
Name: THURSBY, SANDRA
Address: 2043 INNER CIRCLE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712 US

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: LAURA SARGENT

DP

02/17/2009

Electronic Signature of Signing Officer or Director

Date