

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000003219

1. Entity Name
 BOOKS FOR PRISONS OF FLORIDA, INC.



Principal Place of Business
 2321-B NW 41 STREET
 GAINESVILLE, FL 32606

Mailing Address
 2321-B NW 41 STREET
 GAINESVILLE, FL 32606



01102006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 31-1662084 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GIONET, CLIFFORD L
 2321-B NW 41 STREET
 GAINESVILLE, FL 32606

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GIONET, CLIFFORD L
STREET ADDRESS	2321-B NW 41 STREET
CITY - ST - ZIP	GAINESVILLE, FL 32606
TITLE	D
NAME	PIERSTORFF, PEGGY J
STREET ADDRESS	2321-B NW 41 STREET
CITY - ST - ZIP	GAINESVILLE, FL 32606
TITLE	D
NAME	GIONET, JASON C
STREET ADDRESS	2321-B NW 41 STREET
CITY - ST - ZIP	GAINESVILLE, FL 32606
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000383406
 01/12/06-80052-001 61.25

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: *Clifford L. Gionet* CLIFFORD L. GIONET 1/11/06 (352) 375-8195
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #