2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004014

Entity Name: "THE CHILDREN'S READING CENTER, INC."

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
400 OLIVE PALATKA,								
Current Mailing Address:				New Mailing Address:				
400 OLIVE PALATKA,								
FEI Number:	59-3600088	FEI Number Applied For()	FEI Num	nber Not Appli	cable ()	Certifica	ate of Status Desired (X)	
Name and Address of Current Registered Agent: N					Name and Address of New Registered Agent:			
200 REID S CAPITAL C	ID, WILLIAM STREET CITY BANK B FL 32177 U	JILDING						
The above in the State	named entity of Florida.	submits this statement for the pu	ırpose of	changing it	s registered o	office or r	egistered agent, or both,	
SIGNATURE:								
	Electro	nic Signature of Registered Ager	it				Date	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	TO OFF	ICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (HAYES, ALICI P. O. BOX 583 PALATKA, FL	2		Title: Name: Address: City-St-Zip:	D (X JUMP, ERIC 800 ZEAGLER PALATKA, FL	DR.	() Addition	
Title: Name: Address: City-St-Zip:	D (BRONKEMA, I 105 ATKINS L EAST PALATK	ANE		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	D (COPP, LILLI 415 CAMELIA ST. AUGUSTII			Title: Name: Address: City-St-Zip:	D (X FENDER, BAR P.O. BOX 108- WELAKA, FL	BARA 4	() Addition	
Title: Name: Address: City-St-Zip:	D (GRIFFITH, JA 107 CARRIAG PALATKA, FL	E WOODS		Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	D (RODGERS, M 202 EAST PAI PALATKA, FL	METTO ST.		Title: Name: Address: City-St-Zip:	D (X MULLEN, JOS 108 KELLY ST EAST PALATK	E, SR. REET	() Addition	
Title: Name: Address: City-St-Zip:	D (JUMP, ERIC 800 ZEAGLEF PALATKA, FL			Title: Name: Address: City-St-Zip:	D (X KEITH, BRIAN 104 EDGEMOO PALATKA, FL	OR TRAIL	() Addition	

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: JAMES GRIFFITH PRES 04/29/2006