

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004014

FILED
Mar 28, 2009
Secretary of State

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

Current Principal Place of Business:

400 OLIVE STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

400 OLIVE STREET
PALATKA, FL 32177

New Mailing Address:

FEI Number: 59-3600088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TOWNSEND, WILLIAM L JR.
2008 HIGH TERACE
CAPITAL CITY BANK BUILDING
PALATKA, FL 32177 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: JUMP, ERIC
Address: 800 ZEAGLER DR.
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: PACE, DEMARTHA
Address: 113 NANCY PLACE
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: FENDER, BARBARA
Address: P.O. BOX 1084
City-St-Zip: WELAKA, FL 32193

Title: D () Delete
Name: GRIFFITH, JAMES
Address: 107 CARRIAGE WOODS
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: MULLEN, JOSE, SR.
Address: 108 KELLY STREET
City-St-Zip: EAST PALATKA, FL 32131

Title: D () Delete
Name: KEITH, BRIAN
Address: 104 EDGEWOOD TRAIL
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PACE, MARTHA
Address: 113 NANCY PLACE
City-St-Zip: PALATKA, FL 32177

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: ERIC JUMP

PRES

03/28/2009

Electronic Signature of Signing Officer or Director

Date