2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 30, 2007 8:00 am
Secretary of State
04-16-2007 90334 048 ****61.25

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1. Entity Name
THE BLACK STALLION LITERACY PROJECT, INC.

Principal Place of Business	Mailing Address
3081 ARABIAN NIGHTS BLVD. KISSIMMEE, FL 34747	~~6225 WEST BRONSON HIGHWAY~~ 3081 Arabian Nights Blvd. KISSIMMEE, FL 34747

03282007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3654968 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLER, MARK M 3081 ARABIAN NIGHTS BLVD. KISSIMMEE, FL 34747	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 Mark Miller 4/12/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 ←
Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COB Chairman MILLER, MARK M 3081 ARABIAN NIGHTS BLVD. KISSIMMEE, FL 34747	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Dr. Anna Marie Chwastiak Board member 43 Pulaski Highway, Ste 201 Joppa, MD 21085	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Vice Chairman FARLEY, TIMOTHY 3081 ARABIAN NIGHTS BLVD KISSIMMEE, FL 34747	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Burt Rubin, Board Member 980 Fifth Avenue New York, NY 10021	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCST Secretary / Treasurer MILLER, DEIDRE 3081 ARABIAN NIGHTS BLVD. KISSIMMEE, FL 34747	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Bill Jacobs, Board Member 3511 North Soldier Trail Tucson, AZ 85749	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARTSELL, JULIANNE Board Member 2825 FOREST HILLS DR FLAGSTAFF, AZ 86001	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCOTT, LOUISE Board Member 3148 KYLE LOOP FLAGSTAFF, AZ 86004	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

Board Member
Board Member
Board Member

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: Mark Miller 4/12/07 407/239-9223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #