

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P00000018736

1. Entity Name
A CAROUSEL OF BOOKS, INC.



Principal Place of Business
1293 S MISSOURI AVENUE
CLEARWATER, FL 33756

Mailing Address
1293 S MISSOURI AVENUE
CLEARWATER, FL 33756

DO NOT WRITE IN THIS SPACE



04192007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3626386

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

DRAKE-SCHAFFNER, TARRY
1552 GLEN HOLLOW LN. N.
DUNEDIN, FL 34698

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DRAKE-SCHAFFNER, TARRY
STREET ADDRESS	1552 GLEN HOLLOW LN. N.
CITY - ST - ZIP	DUNEDIN, FL 34698
TITLE	DVS
NAME	SCHAFFNER, STEVEN
STREET ADDRESS	1552 GLEN HOLLOW LN. N.
CITY - ST - ZIP	DUNEDIN, FL 34698
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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05/15/07-80051-017 150.00

**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 607, 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:

T. Drake-Schaffner

T. DRAKE-SCHAFFNER
PRESIDENT

Date

4/26/07

Daytime Phone #

727-461-2160