

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38309

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: BOOK SWAP OF PALM HARBOR, INC.

## Current Principal Place of Business:

32840 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684

## New Principal Place of Business:

## Current Mailing Address:

32840 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684

## New Mailing Address:

FEI Number: 59-3124390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACKEY, TERESE  
2429 ISLANDER COURT  
PALM HARBOR, FL 34683 US

## Name and Address of New Registered Agent:

MACKEY, TERESE  
32840 U.S. HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684 US

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: TERESE MACKEY

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: MACKEY, TERESE  
Address: 2429 ISLANDER COURT  
City-St-Zip: PALM HARBOR, FL 34683

Title: S ( ) Delete  
Name: BABBITT, LORAIN  
Address: 2755 CURLEW ROAD- #234  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: MACKEY, TERESE  
Address: 32840 U.S. HIGHWAY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684

Title: S (X) Change ( ) Addition  
Name: BABBITT, LORAIN  
Address: 32840 U.S. HIGHWAY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESE MACKEY

DPS

04/15/2009

Electronic Signature of Signing Officer or Director

Date