

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000001467

**Entity Name:** APPLIED EDUCATIONAL SYSTEMS, INC.

**Current Principal Place of Business:**

312 E. WALNUT ST  
SUITE 200  
LANCASTER, PA 17602

**Current Mailing Address:**

312 E. WALNUT ST  
SUITE 200  
LANCASTER, PA 17602 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SCHULTZ, JAMES  
Address        312 E. WALNUT ST  
                  SUITE 200  
City-State-Zip: LANCASTER PA 17602

Title            SECRETARY  
Name            SCHULTZ, TRACY  
Address        312 E. WALNUT ST  
                  SUITE 200  
City-State-Zip: LANCASTER PA 17602

Title            DIRECTOR  
Name            SCHULTZ, TRACY  
Address        312 E. WALNUT ST  
                  SUITE 200  
City-State-Zip: LANCASTER PA 17602

Title            DIRECTOR  
Name            SCHULTZ, JAMES  
Address        312 E. WALNUT ST  
                  SUITE 200  
City-State-Zip: LANCASTER PA 17602

*I hereby 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 all other like empowered.*

**SIGNATURE:** JAMES SCHULTZ

**PRESIDENT**

**05/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date