2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2010
Secretary of State

DOCUMENT# F95000004932

Entity Name: RECORDING FOR THE BLIND AND DYSLEXIC, INCORPORATED

Current Principal Place of Business:

20 ROSZEL RD
PRINCETON, NJ 08540

New Principal Place of Business:

Current Mailing Address:

20 ROSZEL RD
PRINCETON, NJ 08540

New Mailing Address:

FEI Number: 13-1659345 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ACOSTA, LILY
6704 SW 80TH ST
MIAMI, FL 33143 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: P
Name: KELLY, JOHN
Address: 20 ROSZEL RD
City-St-Zip: PRINCETON, NJ 08540

Title: TD
Name: GOLUBIESKI, JAMES
Address: 120 ALBANY STREET
City-St-Zip: NEW BRUNSWICK, NJ 08901

Title: SD
Name: LOPES, CELESTE V ESQ
Address: 25 HELEN AVENUE
City-St-Zip: PLAINVIEW, NY 11803

Title: CD
Name: HOFER, ANDREW
Address: 140 BROADWAY
City-St-Zip: NEW YORK, NY 10005

Title: D
Name: BARANSKI, MARC
Address: 116 VILLAGE BOULEVARD, SUITE 200
City-St-Zip: PRINCETON, NJ 08540

Title: D
Name: GROB, BRAD
Address: 1139 ALVIRA STREET
City-St-Zip: LOS ANGELES, CA 90035

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

SIGNATURE: ANDREW FRIEDMAN CFO 04/09/2010
Electronic Signature of Signing Officer or Director Date