

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K30445

FILED
Apr 23, 2009
Secretary of State

Entity Name: ACADEMIC SUCCESS PRESS, INC.

Current Principal Place of Business:

220 36TH STREET NE
BRADENTON, FL 34208 US

New Principal Place of Business:

Current Mailing Address:

6023 26TH STREET W
PMB 132
BRADENTON, FL 34207 US

New Mailing Address:

3547 53RD AVENUE W
PMB 132
BRADENTON, FL 34210

FEI Number: 65-0087220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOLTING, PAUL D PHD
220 36TH STREET NE
BRADENTON, FL 34208 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOLTING, PAUL D PHD
Address: 220 36TH STREET NE
City-St-Zip: BRADENTON, FL 34208 US

Title: STD () Delete
Name: NOLTING, KIMBERLY K PHD
Address: 220 36TH STREET NE
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PAUL D. NOLTING

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date