2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N00000005030

Entity Name: THE LANGUAGE PROJECT, INC.

Current Principal Place of Business:

9601 MICCOSUKEE RD-MLC
1
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

PO BOX 13201
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3661615 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KRESGE, CAROL A
9601 MICCOSUKEE RD-MLC
1
TALLAHASSEE, FL 32309 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:	D	( ) Delete
Name:	KRESGE, CAROL A	
Address:	9601 MICCOSUKEE RD-MLC 1	
City-St-Zip:	TALLAHASSEE, FL 32309	
Title:	D	( ) Delete
Name:	BINGHAM, JOHN	
Address:	415 RICHMOND DRIVE SE	
City-St-Zip:	ALBUQUERQUE, NM 87106	
Title:	D	( ) Delete
Name:	CROWLEY, DONNA	
Address:	93 GREENOUGH ROAD	
City-St-Zip:	SOPCHOPPY, FL 32358	
Title:	D	( ) Delete
Name:	KRESGE, LYNDA S	
Address:	44 CAMERON CT.	
City-St-Zip:	PRINCETON, NJ 08540	
Title:	D	( ) Delete
Name:	LAURICELLA, ELLEN	
Address:	3120 TALLAVANA TRAIL	
City-St-Zip:	HAVANA, FL 32333	
Title:	D	( ) Delete
Name:	CHASE, RUTH	
Address:	9601 MICCOSUKEE RD MLC 1	
City-St-Zip:	TALLAHASSEE, FL 32309	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL A KRESGE D 05/04/2009

Electronic Signature of Signing Officer or Director — Date