2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2005
Secretary of State

DOCUMENT# N01000002786

Entity Name: RIDGEVIEW GLOBAL STUDIES ACADEMY, INC.

Current Principal Place of Business:

1000 DUNSON RD
DAVENPORT, FL 33896

New Principal Place of Business:

Current Mailing Address:

1000 DUNSON RD
DAVENPORT, FL 33896

New Mailing Address:

FEI Number: 59-3717146 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FRIER, RALPH H
1000 DUNSON RD
DAVENPORT, FL 33896 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: ALTERIO, TIMOTHY
Address: 7157 HAZELTINE CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete
Name: IZZO, JOSEPH
Address: 6609 BENDELOW DR
City-St-Zip: LAKELAND, FL 33810

Title: D ( ) Delete
Name: FRIER, RALPH
Address: 318 HEATHERPOINT DR
City-St-Zip: LAKELAND, FL 33809

Title: D ( ) Delete
Name: KNAPP, STEPHEN
Address: 135 ELM SQUARE N
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete
Name: MCAFEE, TONY
Address: 282 VIA MARIEL E
City-St-Zip: DAVENPORT, FL 33837

Title: D ( ) Delete
Name: SANTIAGO, ANGEL DR.
Address: 144 SABAL LAKE DR
City-St-Zip: DAVENPORT, FL 33837

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 for the exemption stated in Section 119.07(3)(i), 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: RALPH FRIER D 01/03/2005
Electronic Signature of Signing Officer or Director — Date