

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 07, 2007  
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 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: RALPH H. FRIER

D

02/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date