

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006809

FILED
Apr 11, 2009
Secretary of State

Entity Name: READING WITH THE RHYTHM, INC.

Current Principal Place of Business:

1445 STEELE ST
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

PO BOX 28007
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: 20-5234494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELS, KIMBERLY
9197 CAMSHIRE DR
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

DANIELS, KIMBERLY
450 BUSCH DR. SUITE 3
JACKSONVILLE, FL 32218 US

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:

04/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DANIELS, KIMBERLY
Address: 9197 CAMSHIRE DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP () Delete
Name: DANIELS, ARDELL
Address: 9197 CAMSHIRE DR
City-St-Zip: JACKSONVILLE, FL 32244

Title: T () Delete
Name: JENNINGS, MICHAEL
Address: 1628 N MYRTLE AVENUE
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: PEARCE, NICOLE
Address: 8130 BAYMEADOWS WAY W. #200
City-St-Zip: JACKSONVILLE, FL 32256

Title: T () Delete
Name: JOHNSON, LAKESHA
Address: 1255 PEACE FIELD DR.
City-St-Zip: JACKSONVILLE, FL 32205

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DANIELS, KIMBERLY
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP (X) Change () Addition
Name: DANIELS, ARDELL
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

Title: S (X) Change () Addition
Name: ARCHIBALD, PAM
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

Title: DIR (X) Change () Addition
Name: FLOWERS, KIM
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

Title: T (X) Change () Addition
Name: JOHNSON, LAKESHA
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

Title: TR () Change (X) Addition
Name: JENNINGS, MICHAEL
Address: 450 BUSCH DR. SUITE 3
City-St-Zip: JACKSONVILLE, FL 32218

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: KIMBERLY DANIELS

P

04/11/2009

Electronic Signature of Signing Officer or Director

Date