

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008966

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: ADVANTAGE ACADEMY OF LEE, INC.

## Current Principal Place of Business:

4300 N. UNIVERSITY DRIVE  
SUITE C 201  
SUNRISE, FL 33351

## New Principal Place of Business:

## Current Mailing Address:

4300 N. UNIVERSITY DRIVE  
SUITE C 201  
SUNRISE, FL 33351

## New Mailing Address:

FEI Number: 20-3878840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STRADER, MICHAEL G.  
4300 N. UNIVERSITY DRIVE  
SUITE C 201  
SUNRISE, FL 33351 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: C ( ) Delete  
Name: GRASCH, NATHANIEL  
Address: 4300 N. UNIVERSITY DRIVE SUITE C 201  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: POTTORF, LINDA M.  
Address: 4300 N. UNIVERSITY DRIVE SUITE C 201  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: ISKANDARANI, BASSEMA  
Address: 4300 N. UNIVERSITY DRIVE SUITE C 201  
City-St-Zip: SUNRISE, FL 33351

## 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:

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: NATHANIEL GRASCH

C

01/29/2009

Electronic Signature of Signing Officer or Director

Date