

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000004342

FILED  
Nov 17, 2010  
Secretary of State

Entity Name: RENAISSANCE LEARNING ACADEMY INC.

## Current Principal Place of Business:

5800 CORPORATE WAY  
WEST PALM BEACH, FL 33407

## New Principal Place of Business:

5841 CORPORATE WAY  
#101  
WEST PALM BEACH, FL 33407

## Current Mailing Address:

5800 CORPORATE WAY  
WEST PALM BEACH, FL 33407

## New Mailing Address:

5841 CORPORATE WAY  
#101  
WEST PALM BEACH, FL 33407

FEI Number: 20-8953740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POLLARD, NICHOLAS S MR.  
5800 CORPORATE WAY  
WEST PALM BEACH, FL 33407 US

## Name and Address of New Registered Agent:

POLLARD, NICHOLAS S MR.  
5841 CORPORATE WAY  
101  
WEST PALM BEACH, FL 33407 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: NICHOLAS POLLARD

11/17/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP  
Name: BUSTO, RICHARD  
Address: 149 BEACON LANE  
City-St-Zip: JUPITER, FL 33469 US

Title: DVP  
Name: ROONEY, PATRICK JR  
Address: 1111 N CONGRESS AVE.  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: SCY  
Name: POLLARD, NICHOLAS  
Address: 5800 CORPORATE WAY  
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: TRES  
Name: CARDENAS, JOE  
Address: 5800 CORPORATE WAY  
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: D  
Name: HEDGE, SCOTT  
Address: 5800 CORPORATE WAY  
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: D  
Name: JOHNSON, DEBBIE  
Address: 5800 CORPORATE WAY  
City-St-Zip: WEST PALM BEACH, FL 33407 US

I hereby 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 all other like empowered.

SIGNATURE: NICHOLAS POLLARD

MR.

11/17/2010

Electronic Signature of Signing Officer or Director

Date