2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2011
Secretary of State

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Entity Name: VALRICO LAKE ADVANTAGE ACADEMY, PTSO, INC.

Current Principal Place of Business:

1653 BLOOMINGDALE AVE
VALRICO, FL 33596 US

New Principal Place of Business:

Current Mailing Address:

4300 N. UNIVERSITY DRIVE
C-201
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 27-1246489 **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
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: P
Name: BURT, CARIE
Address: 1653 BLOOMINGDALE AVE
City-St-Zip: VALRICO, FL 33596 US

Title: VP
Name: DIAZ, KELLY M
Address: 1653 BLOOMINGDALE AVE
City-St-Zip: VALRICO, FL 33596 US

Title: M
Name: GUERTIN, BONNIE
Address: 1653 BLOOMINGDALE AVENUE
City-St-Zip: VALRICO, FL 33596

Title: T
Name: SPARKMAN, MISTY
Address: 1653 BLOOMINGDALE AVENUE
City-St-Zip: VALRICO, FL 33596

Title: SEC
Name: SCHOENING, JANINE
Address: 1653 BLOOMINGDALE AVENUE
City-St-Zip: VALRICO, FL 33596

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: CARIE BURT P 01/19/2011

Electronic Signature of Signing Officer or Director — Date