## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003746

Entity Name: READ LAKELAND, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

100 LAKE MORTON DRIVE 1628 SOUTH FLORIDA AVENUE LAKELAND, FL 33801 US LAKELAND, FL 33803 US

Current Mailing Address: New Mailing Address:

100 LAKE MORTON DRIVE 1628 SOUTH FLORIDA AVENUE LAKELAND, FL 33801 US LAKELAND, FL 33803 US

FEI Number: 31-1467587 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOLCE, MICHAEL E 1708 MOCKINGBIRD LANE LAKELAND, FL 33801 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:

City-St-Zip:

- Flateric Circular (Davidson | Annal

City-St-Zip:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: V (X) Change () Addition
Name: MILBURN, KATHLEEN Name: TURNER, RONALD
Address: 5809 OLD SCOTT LAKE ROAD Address: 6048 MISSION DRIVE
City St Zin: LAKELAND EL 23912

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33812

Title: P ( ) Delete Title: ( ) Change ( ) Addition Name: REED, JENNIFER Name: Address: 5316 VERANA COURT Address:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 DOLCE, MIKE
 Name:
 DOLCE, MICHAEL

 Address:
 1708 MOCKINGBIRD LANE
 Address:
 1708 MOCKINGBIRD LANE

 City-St-Zip:
 LAKELAND, FL 33801
 City-St-Zip:
 LAKELAND, FL 33801

 Name:
 COLE, CAMILLA
 Name:
 DOUCE, LYLA

 Address:
 3302 SUMMERLAND HILLS LOOP
 Address:
 2537 LAKEVIEW STREET

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:
 LAKELAND, FL 33801

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: MICHAEL E. DOLCE T 01/21/2009