

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004294

Entity Name: LIGHT EDUCATION, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

3106 TANGLEWOOD DRIVE  
SARASOTA, FL 34239

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 15043  
SARASOTA, FL 34277

## New Mailing Address:

3106 TANGLEWOOD DRIVE  
SARASOTA, FL 34239

FEI Number: 65-0830968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHULTE, MARCIA W  
3106 TANGLEWOOD DR  
SARASOTA, FL 34289 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: DVP ( ) Delete  
Name: SCHULTE, ALLAN A  
Address: 3106 TANGLEWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34239

Title: DPT ( ) Delete  
Name: SCHULTE, MARCIA W  
Address: 3106 TANGLEWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34239

Title: DS ( ) Delete  
Name: OLIVIERI, BROOKE  
Address: 6949 42ND COURT EAST  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: DANIEL, GINGER  
Address: 5049 HIGEL AVE  
City-St-Zip: SARASOTA, FL 34242

Title: D ( ) Delete  
Name: INGRAM, TRACY B  
Address: PO BOX 367333  
City-St-Zip: BONITA SPRINGS, FL 34136

Title: D ( ) Delete  
Name: OLIVIERI, DAVID  
Address: 6949 42ND COURT EAST  
City-St-Zip: SARASOTA, FL 34243

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition  
Name: OLIVIERI, BROOKE S  
Address: 2784 HARVEST DR.  
City-St-Zip: SARASOTA, FL 34240

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PAGE, EDWARD  
Address: 1299 N. TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34236

Title: DS (X) Change ( ) Addition  
Name: MERMIN, GINGER  
Address: 606 OWL WAY  
City-St-Zip: SARASOTA, FL 34236

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: OLIVIERI, DAVID  
Address: 2784 HARVEST DRIVE  
City-St-Zip: SARASOTA, FL 34240

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: MARCIA W SCHULTE

DP

04/24/2009

Electronic Signature of Signing Officer or Director

Date