

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004294

FILED
Apr 29, 2012
Secretary of State

Entity Name: LIGHT EDUCATION, INC.

Current Principal Place of Business:

3106 TANGLEWOOD DRIVE
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

3106 TANGLEWOOD DRIVE
SARASOTA, FL 34239

New Mailing Address:

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: DP
Name: OLIVIERI, BROOKE S
Address: 2784 HARVEST DR.
City-St-Zip: SARASOTA, FL 34240

Title: DT
Name: SCHULTE, MARCIA W
Address: 3106 TANGLEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: DVP
Name: PAGE, EDWARD
Address: 1299 N. TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34236

Title: DS
Name: MERMIN, GINGER
Address: 606 OWL WAY
City-St-Zip: SARASOTA, FL 34236

Title: D
Name: BYRD-BLAKE, MARIE EDD
Address: 8350 N TAMIAMI TRAIL, B322
City-St-Zip: SARASOTA, FL 34243

Title: D
Name: OLIVIERI, DAVID
Address: 2784 HARVEST DRIVE
City-St-Zip: SARASOTA, FL 34240

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: BROOKE SCHULTE OLIVIERI

DP

04/29/2012

Electronic Signature of Signing Officer or Director

Date