

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000089

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE RENAISSANCE LEARNING CENTER, INC.

Current Principal Place of Business:

5800 CORPORATE WAY
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

5800 CORPORATE WAY
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0720113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION
1200 SOUTH PINE ISLAND DRIVE
FORT LAUDERDALE, FL 33324 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 () Delete
Name: HEDGE, SHELLY
Address: 138 BARBADOS DRIVE
City-St-Zip: JUPITER, FL 33448

Title: DV () Delete
Name: SCOTT, JACK
Address: 2811 NORTH MILLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33410

Title: D () Delete
Name: GINGOLD, SUZETTE
Address: 5800 CORPORATE WAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: COOLEY, MYLES
Address: 9121 N. MILITARY TRAIL, SUITE 218
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: TAVIS, TIMOTHY M
Address: 1870 FOREST HILL BLVD., STE. 207
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DT () Delete
Name: HALL, DARRYL
Address: 325 ORANGE WAY
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: DT (X) Change () Addition
Name: HENDERSON, KYLE
Address: 4841 BERKLEY MEWS
City-St-Zip: WEST PALM BEACH, FL 33415

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: SHELLY HEDGE

DP

01/16/2009

Electronic Signature of Signing Officer or Director

Date