

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003448

FILED  
Jan 28, 2010  
Secretary of State

Entity Name: READING EDGE ACADEMY, INC.

**Current Principal Place of Business:**

2975 ENTERPRISE RD  
DEBARY, FL 32713 US

**New Principal Place of Business:**

**Current Mailing Address:**

2975 ENTERPRISE RD  
DEBARY, FL 32713 US

**New Mailing Address:**

FEI Number: 59-3455253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

COMARDO, MARGARET  
919 SOUTH GLENCOE RD.  
NEW SMYRNA BEACH, FL 32168 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: PRES  
Name: COMARDO, MARGARET  
Address: 919 S. GLENCOE ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VPRE  
Name: COMARDO, DONALD  
Address: 919 S. GLENCOE ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T/SE  
Name: BURR, KEVIN  
Address: 1259 GREENLAND TERRACE  
City-St-Zip: DELAND, FL 32720

Title: CHAI  
Name: MITCHELL, JIM  
Address: 101 N. WOODLAND BLVD  
City-St-Zip: DELAND, FL 32724

Title: VCHA  
Name: ESPY, ROBERT  
Address: 101 N WOODLAND BLVD SUITE 101A  
City-St-Zip: DELAND, FL 32720

Title: MEM  
Name: MCKENZIE, SONYA  
Address: 3944 BRANTFORD ROAD  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: MARGARET COMARDO

PRES

01/28/2010

Electronic Signature of Signing Officer or Director

Date