## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000080270

Entity Name: NORTH LIGHT EDUCATIONAL PRODUCTS, INC.

FILED Jun 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2521 NW 17TH LANE 2550 N POWERLINE RD

SUITE 5 STE 105

POMPANO BEACH, FL 33064 US POMPANO BEACH, FL 33064 US

Current Mailing Address: New Mailing Address:

2521 NW 17TH LANE 2550 N POWERLINE RD

SUITE 5 STE 105

POMPANO BEACH, FL 33064 US POMPANO BEACH, FL 33064 US

FEI Number: 20-5024909 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:

MAUTNER, JAMES
2521 NW 17TH LANE
2550 N POWERLINE RD

SUITE 5 STE 105

POMPANO BEACH, FL 33064 US POMPANO BEACH, FL 33064 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: JAMES MAUTNER 06/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MAUTNER, JAMES
 Name:
 MAUTNER, JAMES

 Address:
 2521 NW 17TH LANE SUITE 5
 Address:
 2550 N POWERLINE RD

City-St-Zip: POMPANO BEACH, FL 33064 US City-St-Zip: POMPANO BEACH, FL 33064 US

Name: MAUTNER, PAUL Name: BEERS, RODD

 Address:
 2521 NW 17TH LANE SUITE 5
 Address:
 2550 N POWERLINE RD

 City-St-Zip:
 POMPANO BEACH, FL 33064 US
 City-St-Zip:
 POMPANO BEACH, FL 33064 US

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

 Name:
 BEERS, RODD
 Name:

 Address:
 2521 NW 17TH LANE SUITE 5
 Address:

 City-St-Zip:
 POMAPNO BEACH, FL 33064 US
 City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODD BEERS VP 06/16/2009