2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2009
Secretary of State

DOCUMENT# P07000090164

Entity Name: READAPT, INC.

Current Principal Place of Business:

621 ALTAMIRA CIRCLE
APT 101
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

661 ALTAMIRA CIRCLE
APT 105
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

621 ALTAMIRA CIRCLE
APT 101
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

661 ALTAMIRA CIRCLE
APT 105
ALTAMONTE SPRINGS, FL 32701

FEI Number: 26-0710936 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WITTE, ARONA M PRES
621 ALTAMIRA CIRCLE
APT 101
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

WITTE, ARONA M PRES
661 ALTAMIRA CIRCLE
APT 105
ALTAMONTE SPRINGS, FL 32701 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: ARONA M. WITTE 04/19/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVPT ( ) Delete
Name: WITTE, ARONA M
Address: 621 ALTAMIRA CIRCLE APT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SD ( ) Delete
Name: WITTE, ARONA M
Address: 621 ALTAMIRA CIRCLE APT 101
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPT (X) Change ( ) Addition
Name: WITTE, ARONA M
Address: 661 ALTAMIRA CIRCLE APT 105
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SD (X) Change ( ) Addition
Name: WITTE, ARONA M
Address: 661 ALTAMIRA CIRCLE APT 105
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: ARONA M. WITTE PRES 04/19/2009
Electronic Signature of Signing Officer or Director Date