

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009796

Entity Name: READING STRENGTH TRAINING, INC.**Current Principal Place of Business:**3504 FOGARTY DRIVE
TALLAHASSEE, FL 32309**Current Mailing Address:**3504 FOGARTY DRIVE
TALLAHASSEE, FL 32309 US**FEI Number:** 45-3612723**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KINCL, GLADYS K
3504 FOGARTY DRIVE
TALLAHASSEE, FL 32309 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	FRANKLIN, AMY
Address	354 THORNBERG DR
City-State-Zip:	TALLAHASSEE FL 32312

Title	PRES
Name	KINCL, GLADYS K
Address	3504 FOGARTY DRIVE
City-State-Zip:	TALLAHASSEE FL 32309

Title	D
Name	BIRDWELL, JEARL
Address	2356 TOUR EIFFEL
City-State-Zip:	TALLAHASSEE FL 32308

Title	D
Name	HARRELL, SHIRLEY
Address	3259 APPLETON DR
City-State-Zip:	TALLAHASSEE FL 32311

Title	D
Name	LANDRUM, CAROL
Address	695 BENJAMIN CHAIRES RD
City-State-Zip:	TALLAHASSEE FL 32317

Title	D
Name	REINFELD, SCOTT
Address	1426-3 CAPITAL CIR NE
City-State-Zip:	TALLAHASSEE FL 32308

Title	VP
Name	KINCL, RICHARD L
Address	3504 FOGARTY DRIVE
City-State-Zip:	TALLAHASSEE FL 32309

Title	VP
Name	KINCL, BARRY R
Address	4113 ALPINE WAY
City-State-Zip:	TALLAHASSEE FL 32303

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: GLADYS K. KINCL**OWNER****01/10/2015**

Electronic Signature of Signing Officer/Director Detail

Date