### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006615

Entity Name: LEARNING IS FOR EVERYONE, INC.

**FILED** May 01, 2015 **Secretary of State** CC5856331570

# **Current Principal Place of Business:**

16501 ADAJA DE AVILA TAMPA FL 33613

# **Current Mailing Address:**

16501 ADAJA DE AVILA TAMPA FL 33613 US

FEI Number: 20-0126458 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

KLINGMAN, JAMIE N 2109 E PALM AVE SUITE 204 TAMPA, FL 33605 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: JAMIE KLINGMAN 05/01/2015

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Address

Title DIRECTOR Title **BOARD CHAIR** WILLINGHAM, THERESA COHEN, IRV Name Name Address 5910 HAMMOCK WOODS DRIVE Address 2109 E PALM AVE SUITE 204 City-State-Zip: ODESSA FL 33556

City-State-Zip: TAMPA FL 33605

Title DIRECTOR

5910 HAMMOCK WOODS

**DIRECTOR** Title WILLINGHAM, STEVE

Name Name SHAMBLIN, ROBERT

Address 2109 E PALM AVE ODESSA FL 33556 City-State-Zip:

SUITE 204

TAMPA FL 33605 City-State-Zip: Title **DIRECTOR** 

Title VICE CHAIR Name COHEN, RICHARD

KLINGMAN, JAMIE Name Address 2109 E PALM AVE

> SUITE 204 2109 E PALM AVE Address

City-State-Zip: TAMPA FL 33605 SUITE 204

TAMPA FL 33605 City-State-Zip:

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.

05/01/2015 SIGNATURE: IRV COHEN **BOARD CHAIR**