

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000008274

**Entity Name:** LITERACY, LEADERSHIP, TECHNOLOGY ACADEMY, INC.

**Current Principal Place of Business:**

6771 MADISON AVENUE  
TAMPA, FL 33619

**FILED**  
**Jan 19, 2018**  
**Secretary of State**  
**CC7675296664**

**Current Mailing Address:**

6771 MADISON AVENUE  
TAMPA, FL 33619 US

**FEI Number: 47-0948628**

**Certificate of Status Desired: Yes**

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

BUCK, CHRISTINA M  
1195 BERKLEY RIDGE LANE  
AUBURNDALE, FL 33823 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: CHRISTINA M BUCK**

**01/19/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name LOGAN, LESLEY C  
Address 5420 TWIN CREEKS DRIVE  
City-State-Zip: VALRICO FL 33596

Title PRES  
Name EGGER, JAMES  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

Title B/M  
Name METZ, JACK S  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

Title B/M  
Name EDEL, KIM  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

Title B/M  
Name THOMPSON, SHIRLEY  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

Title COO  
Name BUCK, CHRISTINA M  
Address 1195 BERKLEY RIDGE LANE  
City-State-Zip: AUBURNDALE FL 33823

Title BOARD MEMBER  
Name MAGANN, DAVID  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

Title B/M  
Name NASTHAS, OLGA  
Address 6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619

**Continues on page 2**

*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: CHRISTINA BUCK**

**COO**

**01/19/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            B/M  
Name            COUNCIL, AMBER  
Address        6771 MADISON AVENUE  
City-State-Zip: TAMPA FL 33619