## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008974

Entity Name: LITERACY LABORATORY INC.

**Current Principal Place of Business:** 

411 LAKEWOOD DRIVE WINTER PARK, FL 32789

**Current Mailing Address:** 

411 LAKEWOOD DRIVE WINTER PARK, FL 32789

FEI Number: 45-3487413 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STERLING, CORA 411 LAKEWOOD DRIVE WINTER PARK, FL 32789 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

FILED Jan 10, 2015

**Secretary of State** 

CC1093005110

Officer/Director Detail:

Title PD Title SD

NameSTERLING, CORANameCARDWELL, JANEAddress411 LAKEWOOD DRIVEAddress4 WEBSTER AVENUECity-State-Zip:WINTER PARK FL 32789City-State-Zip:SUMMIT NJ 07901

Title VPD Title D

NameSTERLING, ERINNameKAFLOWITZ, DEBBIEAddress910 LENORA ST, #507Address128 RUNNYMEDE PKWYCity-State-Zip:SEATTLE WA 98121City-State-Zip:NEW PROVIDENCE NJ 07974

Title D Title TD

Name COLCORD, CLAIRE Name COLCORD, DAVID R

Address 1101 LYNCH CIRCLE NORTHWEST Address 1101 LYNCH CIRCLE NORTHWEST

City-State-Zip: WILSON NC 27893 City-State-Zip: WILSON NC 27893

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.

PD

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: CORA STERLING

01/10/2015

Date