

**2018 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

**Officer/Director Detail :**

Title PD  
Name STERLING, CORA  
Address 411 LAKEWOOD DRIVE  
City-State-Zip: WINTER PARK FL 32789

Title SD  
Name CARDWELL, JANE  
Address 4317 HERON POINTE TERRACE  
City-State-Zip: MOSELY VA 23120

Title VPD  
Name STERLING, ERIN  
Address 3926 SUNNYSIDE AVE. N  
City-State-Zip: SEATTLE WA 98103

Title D  
Name KAFLOWITZ, DEBBIE  
Address 128 RUNNYMEDE PKWY  
City-State-Zip: NEW PROVIDENCE NJ 07974

Title D  
Name COLCORD, CLAIRE  
Address 1101 LYNCH CIRCLE NORTHWEST  
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.*

**SIGNATURE: CORA STERLING**

**PD**

**02/16/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date