

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000000897

**Entity Name:** EVERY STUDENT EXCELS, INC.

**Current Principal Place of Business:**

1499 S. FEDERAL HWY  
231  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

1499 S FEDERAL HWY  
231  
BOYNTON BEACH, FL 33023 US

**FEI Number:** 45-3939299

**Certificate of Status Desired:** No

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

GORDON, SHERYL D  
13950 SW 14TH STREET  
DAVIE, FL 33325 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            PRESIDENT  
Name            DUPREE, MARCIE  
Address        750 S.W. 93RD AVE  
City-State-Zip: PEMBROKE PINES FL 33025

Title            ADV  
Name            FARRIS, SHARON R  
Address        7554 PINNACLE POINT  
City-State-Zip: MONTGOMERY AL 36117

Title            VP  
Name            GORDON, SHERYL D  
Address        13950 SW 14TH STREET  
City-State-Zip: DAVIE FL 33324

Title            SEC  
Name            GORDON, SHANICE  
Address        100 UNIVERSITY DRIVE  
City-State-Zip: EDMOND OK 73034

Title            TREA  
Name            MONTGOMERY, JEAN F  
Address        850 N.W. 34TH TERRACE  
City-State-Zip: FORT LAUDERDALE FL 33311

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:** DR. SHERYL D. GORDON

VP

04/26/2017

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

\_\_\_\_\_  
Date