

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001663

**Entity Name:** CENTER FOR LITERACY, ARTS AND SCIENCES, INC.

**Current Principal Place of Business:**

5820 W HALLANDALE BEACH BLVD.  
WEST PARK, FL 33023

**Current Mailing Address:**

5820 W HALLANDALE BEACH BLVD.  
WEST PARK, FL 33023

**FEI Number:** 45-4546667

**Certificate of Status Desired:** No

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

GORDON, JOY  
5820 W. HALLANDALE BEACH BLVD.  
WEST PARK, FL 33023 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 P  
Name GORDON, JOY D  
Address 5820 W. HALLANDALE BEACH BLVD.  
City-State-Zip: WEST PARK FL 33023

Title D  
Name WILLIAMS, KATHY D  
Address 5820 W HALLANDALE BEACH BLVD.  
City-State-Zip: WEST PARK FL 33023

Title D  
Name PIERRE, EDGAR MD  
Address 600 N.E. 36 STREET, PH15  
City-State-Zip: MIAMI FL 33137

Title DIRECTOR  
Name BROWN, RICHARD  
Address 5820 W HALLANDALE BEACH BLVD.  
City-State-Zip: WEST PARK FL 33023

Title DIRECTOR  
Name HERRERA, ALEX  
Address 5820 W HALLANDALE BEACH BLVD.  
City-State-Zip: WEST PARK FL 33023

Title DIRECTOR  
Name RICKETTS-MARTIN, KEISHA  
Address 5820 W HALLANDALE BEACH BLVD.  
City-State-Zip: WEST PARK FL 33023

*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:** JOY D GORDON

P

04/22/2019

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

\_\_\_\_\_  
Date