

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000001663

Entity Name: CENTER FOR LITERACY, ARTS AND SCIENCES, INC.**Current Principal Place of Business:**9130 SW 162ND STREET
MIAMI, FL 33157**Current Mailing Address:**9318 JOINES DR
MATTHEWS, NC 28105 US**FEI Number:** 45-4546667**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GORDON, JOY DR.
9130 SW 162ND STREET
MIAMI, FL 33157 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:** JOY GORDON

04/12/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	D
Name	GORDON, JOY D	Name	WILLIAMS, KATHY D
Address	9130 SW 162 STREET	Address	5820 W HALLANDALE BEACH BLVD.
City-State-Zip:	MIAMI FL 33157	City-State-Zip:	WEST PARK FL 33023
Title	D	Title	DIRECTOR
Name	PIERRE, EDGAR MD	Name	BROWN, RICHARD
Address	600 N.E. 36 STREET, PH15	Address	5820 W HALLANDALE BEACH BLVD.
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	WEST PARK FL 33023
Title	DIRECTOR	Title	DIRECTOR
Name	HERRERA, ALEX	Name	RICKETTS-MARTIN, KEISHA
Address	5820 W HALLANDALE BEACH BLVD.	Address	5820 W HALLANDALE BEACH BLVD.
City-State-Zip:	WEST PARK FL 33023	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 GORDON**PRESIDENT**

04/12/2023

Electronic Signature of Signing Officer/Director Detail

Date