

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

DOCUMENT# N12000009105

**Entity Name:** LEARNING INDEPENDENCE FOR TOMORROW, INC.**Current Principal Place of Business:**13400 PARK BLVD  
SEMINOLE, FL 33776**Current Mailing Address:**13400 PARK BOULEVARD  
SEMINOLE, FL 33776 US**FEI Number:** 46-1088977**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEARNING INDEPENDENCE FOR TOMORROW, INC.  
13400 PARK BOULEVARD  
SEMINOLE, FL 33776 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:** KIM KURUZOVICH

02/20/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CHAIRMAN
Name	MONDELLO, KELI
Address	402 BATH CLUB BLVD S
City-State-Zip:	N. REDINGTON BEACH FL 33708

Title	EXECUTIVE DIRECTOR
Name	KURUZOVICH, KIM
Address	1486 54TH AVE NE
City-State-Zip:	ST PETERSBURG FL 33703

Title	DIRECTOR
Name	SERGIO, CADAVID
Address	400 BEACH DR. NE #1204
City-State-Zip:	ST. PETE FL 33701

Title	DIRECTOR
Name	MAXSON, KYLE
Address	1756 BRIGHTWATERS BLVD. NE
City-State-Zip:	ST. PETERSBURG FL 33704

Title	DIRECTOR
Name	GRANGER, ELLIAD
Address	6004 NATIVE WOODS DR.
City-State-Zip:	TAMPA FL 33625

Title	TREASURER
Name	RICH, MATTHEW
Address	8525 WATERFORD WAY
City-State-Zip:	NIWOT CO 80503

*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:** KIM KURUZOVICH**EXECUTIVE DIRECTOR**

02/20/2019

Electronic Signature of Signing Officer/Director Detail

Date