

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000009170

Entity Name: BETTERLEARNING INC.**Current Principal Place of Business:**105 22ND ST E
BRADENTON, FL 34208**Current Mailing Address:**PO BOX 692
BRADENTON, FL 34206 US**FEI Number:** 82-2715488**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ISAACSON, LYNN ANN
2927 SW FIRST PL
CAPE CORAL, FL 33914 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:** LYNN ANN ISAACSON

06/07/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHIEF EXECUTIVE OFFICER
Name ANDERSON-MANRIQUE, DR. JULIE
PHD
Address 105 22ND STREET EAST
City-State-Zip: BRADENTON FL 34208

Title SECRETARY
Name SMALL, SHERRI JOY
Address 520 7TH ST. W
UNIT 1793
City-State-Zip: PALMETTO FL 34220-1793

Title DIRECTOR
Name MANRIQUE, JONATHAN MICHAEL
Address 105 22ND STREET EAST
City-State-Zip: BRADENTON FL 34208

Title TREASURER
Name ISAACSON, LYNN ANN
Address 2927 SW FIRST PL
City-State-Zip: CAPE CORAL FL 33914

Title REGISTERED AGENT
Name ISAACSON, LYNN ANN
Address 2927 SW FIRST PL
City-State-Zip: CAPE CORAL FL 33914

Title DIRECTOR
Name MANRIQUE, MARIO X
Address 105 22ND ST E
City-State-Zip: BRADENTON FL 34208-1641

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. JULIE ANDERSON-MANRIQUE

CEO

06/07/2023

Electronic Signature of Signing Officer/Director Detail

Date