

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000010131

**FILED**  
**Apr 24, 2020**  
**Secretary of State**  
**3938185830CC**

**Entity Name:** THE EQUITY COUNCIL CORPORATION

**Current Principal Place of Business:**

664 W. LYMAN AVE.  
WINTER PARK, FL 32792

**Current Mailing Address:**

664 W. LYMAN AVE.  
WINTER PARK, FL 32792 UN

**FEI Number: 83-1910319**

**Certificate of Status Desired: No**

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

THOMPSON, LAWANDA  
664 W. LYMAN AVE.  
WINTER PARK, FL 32792 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 THOMPSON, LAWANDA  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK FL 32792

Title SECRETARY  
Name DUNNELL, TYNISHA  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title T  
Name GIBSON, FELICIA  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title OFFICER  
Name AL-ALEEM, SADIQ T  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title OFFICER  
Name DAVIS-BOWMAN, JENNIFER  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title OFFICER, LEAD FIELD SPECIALIST OF EDUCATION  
Name SHEATS, ASHLEY  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title OFFICER  
Name CHANDLER, BARBARA  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

Title OFFICER, FUNDING AND GRANT RESEARCH LEAD  
Name BLOUNT, KENNY  
Address 664 W. LYMAN AVE.  
City-State-Zip: WINTER PARK 32792

*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: LAWANDA THOMPSON**

**PRESIDENT**

**04/24/2020**

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

\_\_\_\_\_  
Date