

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

DOCUMENT# N29338

**Entity Name:** LITERACY VOLUNTEERS OF LEON COUNTY, INC.

**FILED**  
**Mar 26, 2020**  
**Secretary of State**  
**5249416724CC**

**Current Principal Place of Business:**

C/O RHONDA COOPER  
200 WEST PARK AVE  
TALLAHASSEE, FL 32301-4720

**Current Mailing Address:**

C/O RHONDA COOPER  
200 WEST PARK AVE  
TALLAHASSEE, FL 32301-4720 US

**FEI Number: 59-2937641**

**Certificate of Status Desired: No**

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

LANIGAN & ASSOCIATES, P.C.  
2630 CENTENNIAL PLACE  
TALLAHASSEE, FL 32308 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           TREASURER  
Name           MONTAZERI, EBRAHIM  
Address        1950 N. POINT BLVD.  
                  APT. #414  
City-State-Zip: TALLAHASSEE FL 32308

Title           DIRECTOR  
Name           YOUNG, MARY PENELOPE  
Address        1630 BRANCH ST.  
City-State-Zip: TALLAHASSEE FL 32303

Title           PRESIDENT  
Name           CLARK, BARBARA  
Address        2724-B VILA MILANO AVE.  
City-State-Zip: TALLAHASSEE FL 32303

Title           SECRETARY  
Name           BERNDT, MARIAN  
Address        2834 GREEN FOREST LANE  
City-State-Zip: TALLAHASSEE FL 32312

Title           DIRECTOR  
Name           DEBELDER, ALISON  
Address        3122 MAHAN DRIVE  
                  SUITE 802-221  
City-State-Zip: TALLAHASSEE FL 32308

Title           DIRECTOR  
Name           MCKENDRICK, WACHELL  
Address        1438 APPLEWOOD WAY  
City-State-Zip: TALLAHASSEE FL 32312

Title           VP  
Name           MITCHELL, KENDRA  
Address        240 BRILEY COURT  
City-State-Zip: TALLAHASSEE FL 32305

*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: BARBARA CLARK**

**BOARD PRESIDENT**

**03/26/2020**

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

\_\_\_\_\_  
Date