

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49840

Entity Name: LITERACY FLORIDA!, INC.**Current Principal Place of Business:**573 STONEHOUSE ROAD
TALLAHASSEE, FL 32301**Current Mailing Address:**PO BOX 180396
TALLAHASSEE, FL 32318 US**FEI Number:** 59-2974070**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORVELL, GLENDA LTREAS
3817 TALLAVANA TRL
HAVANA, FL 32333 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	NEWELL, SANDRA O
Address	573 STONEHOUSE ROAD
City-State-Zip:	TALLAHASSEE FL 32301

Title	V
Name	DEMORANVILLE, JOSES
Address	8811 CAVENDER DR
City-State-Zip:	JACKSONVILLE FL 32216

Title	T
Name	NORVELL, GLENDA L
Address	3817 TALLAVANA TRAIL
City-State-Zip:	HAVANA FL 32333

Title	S
Name	NELSON, SARA
Address	3404 LACEWOOD RD
City-State-Zip:	TAMPA FL 33618

Title	PP
Name	WILDER, JIM
Address	2981 LOOKOUT BLVD S
City-State-Zip:	PORT SAINT LUCIE FL 34399

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: GLENDA LIGHTSEY NORVELL**TREASURER****04/01/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date