

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001736

Entity Name: LITERACY VOLUNTEERS OF WASHINGTON COUNTY, INC.

FILED
Mar 14, 2014
Secretary of State
CC7454358542

Current Principal Place of Business:

WASHI-HOLMES TECH CENTER
757 HOYT ST
CHIPLEY, FL 32428

Current Mailing Address:

P.O. BOX 701
CHIPLEY, FL 32428-0701 US

FEI Number: 59-2892850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARKE, DOROTHY B PRESIDENT
757 HOYT STREET
CHIPLEY, FL 32428 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: DOROTHY B. CLARKE

03/14/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CLARKE, DOROTHY B PRESIDENT
Address P.O.BOX 345
City-State-Zip: CHIPLEY FL 32425

Title PRES
Name DOROTHY, CLARKE
Address 232 SOUTH BLVD
City-State-Zip: CHIPLEY FL 32428

Title SECT
Name PELLETIER, MARY ANN
Address 3031 PINE OAKS LANE
City-State-Zip: CHIPLEY FL 32428

Title MEMBER
Name COGGIN, VONCEIL
Address 620 5TH STREET/PO BOX 432
City-State-Zip: CHIPLEY FL 32428

Title TREAS.
Name DAY, MARGARET
Address 859 CHESTNUT STREET
City-State-Zip: CHIPLEY FL 32428

Title MEMB
Name COBB, BRUCE
Address HWY 279
City-State-Zip: GREENHEAD FL 32428

Title VICE-PRESIDENT
Name CHAMBERS, HELEN V-PRESIDENT
Address P>O>BOX 233
City-State-Zip: CARYVILLE FL 32427

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: DOROTHY CLARKE

PRESIDENT

03/14/2014

Electronic Signature of Signing Officer/Director Detail

Date