

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000002641

**Entity Name:** THE COMMUNITY LEARNING CENTER, INC.**Current Principal Place of Business:**1411 N FORT HARRISON AVE  
CLEARWATER, FL 33755**Current Mailing Address:**1411 N FORT HARRISON AVE  
CLEARWATER, FL 33755 US**FEI Number:** 59-3521809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILLESTAD, SHARON  
406 1/2 NORTH LINCOLN AVE  
CLEARWATER, FL 33755 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 SECRETARY  
Name CAPUTO, CHERYL  
Address 541 JASMINE WAY  
City-State-Zip: CLEARWATER FL 33756

Title CEO, BM  
Name HAGGERTY, HOLLY  
Address 406 N. LINCOLN AVE.  
City-State-Zip: CLEARWATER FL 33755

Title BM  
Name GENDUSA, JOY  
Address 404 S. MARTIN LUTHER KING AVE  
City-State-Zip: CLEARWATER FL 33756

Title TREASURER  
Name CHAVANNE, CATHERINE  
Address 1560 MAPLE ST  
City-State-Zip: CLEARWATER FL 33755

Title CHAIRMAN  
Name HAGGERTY, BRENDAN  
Address 406 N. LINCOLN AVE.  
City-State-Zip: CLEARWATER FL 33755

Title BM  
Name CLOUDEN, PAT  
Address 11596 94TH ST N  
City-State-Zip: LARGO FL 33773

Title BM  
Name SWITZER, ERICA  
Address 517 SKYVIEW AVE  
City-State-Zip: CLEARWATER FL 33765

Title BM  
Name SLEDGE, LAWRENCE D  
Address 1009 PALM TERRACE DR  
City-State-Zip: CLEARWATER FL 33755

**Continues on page 2**

*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:** HOLLY HAGGERTY

CEO

04/21/2014

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

**Officer/Director Detail Continued :**

Title	BM
Name	MOORE, ANGIE
Address	100 PIERCE ST UNIT 404
City-State-Zip:	CLEARWATER FL 33756