| DOCUMENT# N98000002641 | |
|------------------------|--|
| | |

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

Name and Address of Current Registered Agent:

HARPER, KRISTEN 712 RICHARDS AVE CLEARWATER, FL 33755 US Certificate of Status Desired: Yes

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 | : KRISTEN HARPER | 01/09/2024 | | | |
|-----------------|--|-----------------|-------------------------------|--|--|
| | Electronic Signature of Registered Agent | | Date | | |
| Officer/Direc | tor Detail : | | | | |
| Title | CHAIRMAN | Title | CEO | | |
| Name | KATHY, WACH | Name | HANSEN, JENNIFER | | |
| Address | 13855 PINECREST DR | Address | 481 LIMEWOOD AVE | | |
| City-State-Zip: | LARGO FL 33774 | City-State-Zip: | DUNEDIN FL 34698 | | |
| Title | SECRETARY | Title | PRESIDENT | | |
| Name | BOETTNER, TERESA | Name | GENDUSA, JOY | | |
| Address | 1469 TURNER ST | Address | 404 S. MARTIN LUTHER KING AVE | | |
| City-State-Zip: | CLEARWATER FL 33756 | City-State-Zip: | CLEARWATER FL 33756 | | |
| Title | TREASURER | Title | BOARD MEMBER | | |
| Name | KUGLER, BRAD | Name | CAPUTO, CHERYL DR. | | |
| Address | 2191 CYPRESS PT DR N | Address | 541 JASMINE WAY | | |
| City-State-Zip: | CLEARWATER FL 33763 | City-State-Zip: | CLEARWATER FL 33756 | | |
| Title | BOARD MEMBER | Title | BOARD MEMBER | | |
| Name | CLOUDEN, PAT | Name | MOORE, ANGIE | | |
| Address | 11596 94TH ST, N | Address | 100 PIERCE ST # 404 | | |
| City-State-Zip: | LARGO FL 33773 | City-State-Zip: | CLEARWATER FL 33756 | | |

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: JENNIFER HANSEN

CEO

Electronic Signature of Signing Officer/Director Detail

FILED Jan 09, 2024 Secretary of State 3754437330CC

)fficer/Director Detail

Officer/Director Detail Continued :

| Title | BOARD MEMBER | Title | BOARD MEMBER |
|-----------------|--------------------|-----------------|---------------------|
| Name | PATRICK, GARY | Name | KINTZEL, KEANAN |
| Address | 1466 STURBRIDGE CT | Address | 645 CLEVELAND ST |
| City-State-Zip: | LARGO FL 33774 | City-State-Zip: | CLEARWATER FL 33755 |
| Title | BOARD MEMBER | | |
| i nuc | BOARD MEMBER | | |

Address 1918 COVE LANE

BRUMMER, ANNE

Name

City-State-Zip: CLEARWATER FL 33764