

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004839

Entity Name: FLORIDA DISTANCE LEARNING ASSOCIATION, INC.**Current Principal Place of Business:**1750 NE 167TH STREET
327
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**1750 NE 167TH STREET
327
NORTH MIAMI BEACH, FL 33162**FEI Number:** 65-1124214**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SU, HUI FANG H. DR.
1750 NE 167TH STREET, ROOM #327
NORTH MIAMI BEACH, FL 33162 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:** HUI FANG HUANG SU

01/26/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	SU, HUI FANG H. DR.
Address	2150 ARECA PALM ROAD
City-State-Zip:	BOCA RATON FL 33432
Title	D
Name	GLENN , JOANNE S
Address	1750 NE 167TH ST.ROOM #327
City-State-Zip:	NORTH MIAMI BEACH FL 33162
Title	DIRECTOR
Name	BROWN, VICTORIA DR.
Address	1750 NE 167TH STREET 327
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	S
Name	HOWARD, CRYSTAL
Address	1750 NE 167TH ST.
City-State-Zip:	NORTH MIAMI BEACH FL 33162
Title	D
Name	MARCHMAN, BRIAN DR.
Address	1750 NE 167TH STREET 327
City-State-Zip:	NORTH MIAMI BEACH FL 33162
Title	DIRECTOR
Name	PHILLIPS, WILLIAM DR.
Address	1750 NE 167TH STREET 327
City-State-Zip:	NORTH MIAMI BEACH FL 33162

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: HUI FANG SU**PRESIDENT**

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date