

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000005920

**Entity Name:** LITERACY TRUST, INC.

**Current Principal Place of Business:**

3324 W UNIVERSITY AVE  
#116  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3324 W UNIVERSITY AVE  
#116  
GAINESVILLE, FL 32607

**FEI Number:** 59-3551080

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HOOVER, NORA L  
10136 SW 52ND RD  
GAINESVILLE, FL 32608 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 D  
Name HOOVER, NORA  
Address 10136 SW 52ND ROAD  
City-State-Zip: GAINESVILLE FL 32607  
  
Title DIRECTOR OF TALENT, STRATEGY  
AND OPERATIONS  
Name ZAPICO, TIFFANY  
Address 180 WEST 80TH STREET  
SUITE 212  
City-State-Zip: NEW YORK NY 10024

Title D  
Name SILVERMAN, BENEDICT  
Address 51 SHERMAN HILL RD. BLDG A  
#A1040 PO DR. C  
City-State-Zip: WOODBURY CT 06798

*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:** TIFFANY ZAPICO

**DIRECTOR OF TALENT, STRATEGY AND OPERATIONS**      04/23/2015

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

\_\_\_\_\_  
Date