DOCUMENT# F15000003751

Entity Name: LEARN TO COPE, INC.

### **Current Principal Place of Business:**

4 COURT STREET, SUITE 110 TAUNTON, MA 02780

## **Current Mailing Address:**

4 COURT STREET, SUITE 110 TAUNTON, MA 02780

## FEI Number: 26-0236431

### Name and Address of Current Registered Agent:

HICKEY, DIANE 8920 PARKSIDE ESTATES DRIVE DAVIE, FL 33328 US

#### Certificate of Status Desired: No

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	CEO	Title	D, S	
Name	PETERSON, JOANNE	Name	BOYLE, MAUREEN	
Address	4 COURT STREET, SUITE 110	Address	4 COURT STREET, SUITE 110	
City-State-Zip:	TAUNTON MA 02780	City-State-Zip:	TAUNTON MA 02780	
Title	D	Title	D	
Name	KELLY, JOHN DR	Name	ROBERTS, MARGUERITE	
Address	4 COURT STREET, SUITE 110	Address	4 COURT STREET, SUITE 110	
City-State-Zip:	TAUNTON MA 02780	City-State-Zip:	TAUNTON MA 02780	
Title	D, T	Title	D, P	
Name	HICKEY, DIANE	Name	CAPPIELLO, KOREN	
Address	8920 PARKSIDE ESTATES DR	Address	4 COURT STREET, SUITE 110	
City-State-Zip:	DAVIE FL 33328	City-State-Zip:	TAUNTON MA 02780	
Title	D	Title	D	
Name	LONG, LORI	Name	BARTLETT, CHERYL	
Address	4 COURT STREET, SUITE 110	Address	4 COURT STREET, SUITE 110	
City-State-Zip:	TAUNTON MA 02780	City-State-Zip:	TAUNTON MA 02780	

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: JOANNE PETERSON

CEO

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Jan 09, 2017 Secretary of State CC7734644551