

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732846

FILED
Jan 21, 2010
Secretary of State

Entity Name: LEARNING RESOURCE CENTER OF POLK COUNTY, INC.

Current Principal Place of Business:

1628 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

1628 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 51-0182646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAVEN, PAMELA
1628 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: MENEFEY, KEN
Address: P.O. BOX 95448
City-St-Zip: LAKELAND, FL 33804

Title: 1VP
Name: CHAPMAN, STEPHEN
Address: 126 ELM SQUARE SOUTH
City-St-Zip: LAKELAND, FL 33813

Title: 2VP
Name: WATSON, TOM
Address: 1400 GRASSLANDS BLVD. #16
City-St-Zip: LAKELAND, FL 33803

Title: T
Name: CARTER, MICHAEL
Address: 811 EAST MAIN STREET
City-St-Zip: LAKELAND, FL 33801

Title: S
Name: BARCLAY, JOYCE
Address: 5001 STATE ROAD 540 W
City-St-Zip: WINTER HAVEN, FL 33880

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: PAMELA CRAVEN

DIRE

01/21/2010

Electronic Signature of Signing Officer or Director

Date