

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732846

FILED
Jan 04, 2012
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:

CRAVEN, PAMELA DR.
1628 SOUTH FLORIDA AVENUE
LAKELAND, FL 33803 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: PAMELA P. CRAVEN

01/04/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FOLSOM, MICHAEL
Address: 4839 HIGHLANDS PLACE DR.
City-St-Zip: LAKELAND, FL 33813

Title: 1VP
Name: KILEY, TIMOTHY
Address: 1637 ROBERTSON ST.
City-St-Zip: LAKELAND, FL 33803

Title: 2VP
Name: CANTRALL, MATTHEW
Address: 5319 SANDRA WAY
City-St-Zip: LAKELAND, FL 33813

Title: T
Name: BUNCE, YVONNE
Address: 5607 EMERALD RIDGE BLVD
City-St-Zip: LAKELAND, FL 33813

Title: S
Name: LANSFORD, FRANK
Address: 710 GRASSLANDS VILLAGE CIRCLE
City-St-Zip: LAKELAND, FL 33803

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 P. CRAVEN

DR.

01/04/2012

Electronic Signature of Signing Officer or Director

Date