

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004844

FILED
Mar 15, 2011
Secretary of State

Entity Name: TUTOR CHAT LIVE FOUNDATION, INC.

Current Principal Place of Business:

2929 MYRTLE OAK CIR
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

2929 MYRTLE OAK CIR
DAVIE, FL 33328

New Mailing Address:

FEI Number: 26-4567085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPELETTI, SANDRA
2929 MYRTLE OAK CIR
DAVIE, FL 33328 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: PRES
Name: CAPELETTI, SANDRA
Address: 2929 MYRTLE OAK CIRCLE
City-St-Zip: FT LAUDERDALE, FL 33328

Title: SEC
Name: CAPELETTI, MATTHEW
Address: 2929 MYRTLE OAK CIRCLE
City-St-Zip: DAVIE, FL 33328

Title: DIR
Name: KATTAN, DIANA
Address: 11111 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33181

Title: DIR
Name: CAPELETTI, SANDRA M
Address: 2929 MYRTLE OAK CIRCLE
City-St-Zip: DAVIE, FL 33328

Title: DIR
Name: SHECTMAN, SAUNDRA
Address: 711 N. SURREY AVE
City-St-Zip: VENTNOR CITY, NJ 04806

Title: DIR
Name: SCHNEIDER, NICHOLAS
Address: 15649 HIDDEN OAKS COURT
City-St-Zip: CARMEL, IN 46033 US

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: SANDRA CAPELETTI

DIR

03/15/2011

Electronic Signature of Signing Officer or Director

Date