

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000003129

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** HIGHER LEARNING RESOURCE CENTER INC.

**Current Principal Place of Business:**

12261 SW 250TH TER  
PRINCETON, FL 33032

**New Principal Place of Business:**

**Current Mailing Address:**

12261 SW 250TH TER  
PRINCETON, FL 33032

**New Mailing Address:**

**FEI Number:** 27-2230391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOWARD, TAMMIE M  
12261 SW 250TH TER  
PRINCETON, FL 33032 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:** PCEO  
**Name:** HOWARD, TAMMIE M  
**Address:** 12261 SW 250TH TER  
**City-St-Zip:** PRINCETON, FL 33032

**Title:** D  
**Name:** HOWARD, NASH B  
**Address:** 12261 SW 250TH TERR  
**City-St-Zip:** PRINCETON, FL 33032

**Title:** D  
**Name:** ODELY, TERRICA  
**Address:** 26630 SW 136TH AVE  
**City-St-Zip:** NARANIA, FL 33032

**Title:** D  
**Name:** WOODS, NICHOLE  
**Address:** P.O. BOX 924046  
**City-St-Zip:** HOMESTEAD, FL 33092

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:** TAMMIE M. HOWARD

CEO

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date