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FILED

Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000003673 (1)

1. Corporation Name

GREATER READING OR WRITING SKILLS LITERACY COUNCIL, INC.



Principal Place of Business

Mailing Address

52 EAST MAIN STREET
APOPKA FL 32703
US52 EAST MAIN STREET
APOPKA FL 32703-5256
US3. Date Incorporated or Qualified
08/13/19933a. Date of Last Report
02/27/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-3200028Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEHLMAYER, CY
3435 BUTTON BUSH DRIVE
ZELLWOOD FL 32798

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE
NAME SEHLMAYER, CY
STREET ADDRESS 3435 BUTTON BUSH DR
CITY-ST-ZIP ZELLWOOD FL 327981.1 TITLE DS Pam Warlaumont - S ☐ Change ☒ Addition
1.2 NAME 151 E.S. Fawcett Rd.
1.3 STREET ADDRESS Winter Park, FL 32789
1.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME GILMORE, ANNIE L
STREET ADDRESS 218 E 16 STREET
CITY-ST-ZIP APOPKA FL 327032.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Marilina Viera
2.3 STREET ADDRESS 5412 Britan Dr.
2.4 CITY-ST-ZIP Orlando, FL 32808TITLE ☐ DELETE
NAME DAVIS, ROSE
STREET ADDRESS 649 N SLOTE
CITY-ST-ZIP APOPKA FL 327123.1 TITLE President ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME NOEL, ELAINE
STREET ADDRESS 1313 CANTERBURY RD
CITY-ST-ZIP WINTER PARK FL 327894.1 TITLE DT Janice Richner ☐ Change ☒ Addition
4.2 NAME 2100 Leg Rd. Suite A
4.3 STREET ADDRESS Winter Park, FL 32789
4.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME LOSO, GINNY
STREET ADDRESS 312 COUNTRY LANDING BLVD
CITY-ST-ZIP APOPKA FL5.1 TITLE Vice-President ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☒ DELETE
NAME DP TOWARD, ROSARIO
STREET ADDRESS 1000 DOUGLAS AVE., APT. 111
CITY-ST-ZIP ALTAMONTE SPRINGS FL6.1 TITLE Linda Decker ☐ Change ☒ Addition
6.2 NAME 943-205 Bakewell Ct.
6.3 STREET ADDRESS Lake Mary, FL 32746
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marilina Viera, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-97

Date

407-889-0100

Daytime Phone # 0012680

CR2E037 (9/96)