

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008755

Entity Name: ASSOCIATION OF EARLY LEARNING COALITIONS, INC.**Current Principal Place of Business:**206-B S. MONROE ST.
TALLAHASSEE, FL 32301**Current Mailing Address:**206-B S. MONROE ST.
TALLAHASSEE, FL 32301 US**FEI Number:** 20-3362904**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CMARTIN & ASSOCIATES, INC
1705 METROPOLITAN BLVD
SUITE 102
TALLAHASSEE, FL 32308 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:** CHERYL GRAGANELLA

04/19/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VICE CHAIR
Name	LOUPE, TONY
Address	5000 NW DUNN RD.
City-State-Zip:	FORT PIERCE FL 34981

Title	BOARD MEMBER
Name	SURRENCY, LASHONE
Address	1104 SW MAIN BLVD
City-State-Zip:	LAKE CITY FL 32025

Title	EXECUTIVE DIRECTOR
Name	SMELTZER, ERIN
Address	206-B S. MONROE ST.
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	LEBO, DJ
Address	135 EXECUTIVE CIRCLE #100
City-State-Zip:	DAYTONA BEACH FL 32114

Title	CHAIR
Name	CARSON, LINDSAY
Address	206-B S. MONROE ST.
City-State-Zip:	TALLAHASSEE FL 32301

Title	SECRETARY
Name	BUCHBINDER, LESHA
Address	206-B S. MONROE ST.
City-State-Zip:	TALLAHASSEE FL 32301

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: LINDSAY CARSON

CHAIR

04/19/2021

Electronic Signature of Signing Officer/Director Detail

Date