2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2017
Secretary of State
CC9378178327

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Entity Name: ASSOCIATION OF EARLY LEARNING COALITIONS, INC.

Current Principal Place of Business:

4472 OKEECHOBEE ROAD
FORT PIERCE, FL 34947

Current Mailing Address:

4472 OKEECHOBEE ROAD
FORT PIERCE, FL 34947 US

FEI Number: 20-3362904

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LOUPE, ANTHONY
4472 OKEECHOBEE ROAD
FORT PIERCE, FL 34947 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: ANTHONY LOUPE 03/15/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	GUSE, MATT
Address	2639 N. MONROE STREET BUILDING C
City-State-Zip:	TALLAHASSEE FL 32303

Title	VC
Name	BEARD, SKY
Address	1018 S. FLORIDA AVE
City-State-Zip:	ROCKLEDGE FL 32955

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

Title	SECRETARY
Name	BUCHBINDER, LESHA
Address	1300 CITIZENS BLVD SUITE 206
City-State-Zip:	LEESBURG FL 34748

Title	TREASURER
Name	LOUPE, ANTHONY
Address	4472 OKEECHOBEE ROAD
City-State-Zip:	FORT PIERCE FL 34947

Title	OFFICER
Name	SUNKA, SUSAN
Address	1631 E. VINE STREET SUITE E
City-State-Zip:	KISSIMMEE FL 34744

Title	OFFICER
Name	FRICKS, ROSEANN
Address	2300 SW 17TH ROAD
City-State-Zip:	OCALA FL 34471

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: ANTHONY F. LOUPE TREASURER 03/15/2017

Electronic Signature of Signing Officer/Director Detail — Date