

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000010994

Entity Name: ASSOCIATION FOR WRITING ACROSS THE CURRICULUM, INC**Current Principal Place of Business:**1311 SE 14TH AVE
DEERFIELD BEACH, FL 33441**Current Mailing Address:**1311 SE 14TH AVE
DEERFIELD BEACH, FL 33441 US**FEI Number: 83-2268770****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GALIN, JEFFREY R PHD
1311 SE 14TH AVE
DEERFIELD BEACH, FL 33441 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: JEFFREY R. GALIN****04/21/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BRITT-SMITH, LAURIE A
Address 1 COLLEGE STREET
 COLLEGE OF THE HOLY CROSS 210
 DINAND
City-State-Zip: WORCESTER MA 01610

Title SECRETARY
Name ROSINSKI, PAULA
Address 100 CAMPUS DRIVE
 ELON UNIVERSITY CAROL GROTNES
 BELK LIBRARY 119A
City-State-Zip: ELON NC 27244

Title INCOMING CHAIR
Name FODREY, CRYSTAL N
Address DEPARTMENT OF ENGLISH
 HUMANITIES 336A UNIVERSITY OF
 LOUISVILLE
City-State-Zip: LOUISVILLE KY 40292

Title OUTGOING CHAIR
Name RADEMAEKER, JUSTIN
Address MAIN HALL 541
 WEST CHESTER UNIVERSITY
City-State-Zip: WEST CHESTER PA 19383

Title CHAIR
Name ELDER,, CRISTYN L
Address HUMANITIES 355
 THE UNIVERSITY OF NEW MEXICO
City-State-Zip: ALBUQUERQUE NM 87131

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: LAURIE A BRITT-SMITH**TREASURER****04/21/2025**

Electronic Signature of Signing Officer/Director Detail

Date