

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000007937

Entity Name: INCLUSIVE LEARNING COOPERATIVE, INC.

Current Principal Place of Business:

1622 25TH STREET
NICEVILLE, FL 32578

Current Mailing Address:

1622 25TH STREET
NICEVILLE, FL 32578 US

FEI Number: 87-1527317

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
3030 N ROCKY POINT DR.STE 150A
TAMPA, FL 33607 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name BIRD, LAURA
Address 1622 25TH STREET
City-State-Zip: NICEVILLE FL 32578

Title DT
Name CALIM, MONICA
Address 702 BAYSHORE DRIVE
City-State-Zip: NICEVILLE FL 32578

Title DS
Name DENIS, AMANDA
Address 1005 MARTIN LUTHER KING JR. AVE
APT F7
City-State-Zip: CRESTVIEW FL 32536

Title GENERAL BOARD MEMBER
Name SHEPHERD, BRANDY N
Address 1511 GLENLAKE CIRCLE
City-State-Zip: NICEVILLE FL 32578

Title GENERAL BOARD MEMBER
Name HEPWORTH, TABITHA
Address 452 COUNTY HWY 147
City-State-Zip: LAUREL HILL FL 32567

Title GENERAL BOARD MEMBER
Name LAURIE, BRADLEY R
Address 6019 TRESTLE ST.
City-State-Zip: CRESTVIEW FL 32536

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: LAURA BIRD

PRESIDENT

03/04/2024

Electronic Signature of Signing Officer/Director Detail

Date