

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29338

**Entity Name:** LITERACY VOLUNTEERS OF LEON COUNTY, INC.**Current Principal Place of Business:**1917 WAHALAW COURT  
TALLAHASSEE, FL 32301**Current Mailing Address:**LITERACY VOLUNTEERS OF LEON COUNTY  
1700 N. MONROE SUITE 11-217  
TALLAHASSEE, FL 32303 US**FEI Number:** 59-2937641**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LANIGAN & ASSOCIATES, P.C.  
2630 CENTENNIAL PLACE  
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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	TREASURER
Name	MONTAZERI, EBRAHIM
Address	1950 N. POINT BLVD. APT. #414
City-State-Zip:	TALLAHASSEE FL 32308

Title	PRESIDENT
Name	CLARK, BARBARA
Address	2724-B VILA MILANO AVE.
City-State-Zip:	TALLAHASSEE FL 32303

Title	VP
Name	MITCHELL, KENDRA
Address	240 BRILEY COURT
City-State-Zip:	TALLAHASSEE FL 32305

Title	DIRECTOR
Name	YOUNG, MARY PENELOPE
Address	1630 BRANCH ST.
City-State-Zip:	TALLAHASSEE FL 32303

Title	SECRETARY
Name	BERNDT, MARIAN
Address	2834 GREEN FOREST LANE
City-State-Zip:	TALLAHASSEE FL 32312

Title	DIRECTOR
Name	COOPER, RHONDA
Address	1917 WAHALAW COURT
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:** RHONDA COOPER**DIRECTOR****04/28/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date