

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000128

Entity Name: COMMISSION ON ADULT BASIC EDUCATION, INC.**Current Principal Place of Business:**815 4TH AVE. W
BRADENTON, FL 34205-8609**Current Mailing Address:**P.O. BOX 14400
BRADENTON, FL 34280 US**FEI Number:** 59-3164580**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADULT LITERACY LEAGUE INC.
345 W. MICHIGAN STREET
SUITE 100
ORLANDO, FL 32806 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 VP, MEMBERSHIP
Name FONTENOT, ADRIENNE VP,
MEMBERSHIP
Address 815 4TH AVE. W
City-State-Zip: BRADENTON FL 34205-8609

Title TREASURER
Name SMITH, POLLY
Address P.O. BOX 14400
City-State-Zip: BRADENTON FL 34280

Title SECRETARY
Name DENISCO, JULI
Address 815 4TH AVE. W
City-State-Zip: BRADENTON FL 34205-8609

Title PRESIDENT
Name THOMAS, SHAKETTA
Address 815 4TH AVE. W
City-State-Zip: BRADENTON FL 34205-8609

Title PAST PRESIDENT
Name JODY, ANGELONE
Address 815 4TH AVE. W
City-State-Zip: BRADENTON FL 34205-8609

Title PRESIDENT ELECT
Name MARTINEZ , HECTOR
Address 815 4TH AVE. W
City-State-Zip: BRADENTON FL 34205-8609

Title CEO
Name BONNEY, SHARON
Address P.O. BOX 14400
City-State-Zip: BRADENTON FL 34280

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: POLLY SMITH

TREASURER

02/04/2025

Electronic Signature of Signing Officer/Director Detail

Date