

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002011

**Entity Name:** TECHNOLOGY EDUCATION RESEARCH REDESIGN ALLIANCE, INC.**FILED**  
**Feb 11, 2022**  
**Secretary of State**  
**7576321186CC****Current Principal Place of Business:**5435 DEFOOR FERRY RD  
TALLAHASSEE, FL 32309**Current Mailing Address:**P.O. BOX 12848  
TALLAHASSEE, FL 32317 US**FEI Number: 59-3388610****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ORTEGA, JORGE  
5435 DEFOORS FERRY RD.  
TALLAHASSEE, FL 32309 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: JORGE ORTEGA****02/11/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title CHAIRMAN  
Name NANN, LARRY  
Address 3016 CUNARD DRIVE  
City-State-Zip: VALRICO FL 33594Title TREASURER  
Name REECE, RICK  
Address 4911 TYLER STREET  
City-State-Zip: HOLLYWOOD FL 33021Title COO  
Name ORTEGA, JORGE  
Address 5435 DEFOOR FERRY RD  
City-State-Zip: TALLAHASSEE FL 32309Title DIRECTOR  
Name PETERSON, COLLEEN  
Address 958 SW WHITTIER TERRACE  
City-State-Zip: PORT ST. LUCIE FL 34953Title SECRETARY  
Name MATHISON, ALAN  
Address 281 SW AIRVIEW AVENUE  
City-State-Zip: PORT ST. LUCIE FL 34984Title DIRECTOR  
Name KOHLER, TRACI  
Address 2127 IMPERIAL CIRCLE  
City-State-Zip: NAPLES FL 34110

*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: JORGE ORTEGA****COO****02/11/2022**

Electronic Signature of Signing Officer/Director Detail

Date