2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001023

FILED May 23, 2008 Secretary of State

Entity Name: HILLSBOROUGH COUNTY SCHOOL READINESS COALITION, INC.

Current Principal Place of Business: New Principal Place of Business: 1002 E. PALM AVENUE 1002 E. PALM AVENUE TAMPA, FL 33605 TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** 1002 E. PALM AVENUE 1002 EAST PALM AVE TAMPA, FL 33605 TAMPA, FL 33605 FEI Number: 59-3626765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCGERALD, DAVID X 1002 E. PALM AVENUE TAMPA, FL 33605 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete JURADO, MELODY JURADO, MELODY Name: Name: 5406 EAST RIVERHILLS DRIVE Address: 5406 EAST RIVERHILLS DRIVE Address: City-St-Zip: TEMPLE TERRACE, FL 33617 US City-St-Zip: TEMPLE TERRACE, FL 33617 US (X) Change () Addition Title: () Delete Title: Name: STOLLER, LINDA Name: STOLLER, LINDA Address: 8900 N. ARMENIA. STUIE 210 Address: 8900 N. ARMENIA. STUIE 210 City-St-Zip: TAMPA, FL 33604 US City-St-Zip: TAMPA, FL 33604 US Title: () Delete Title: () Change (X) Addition VITTORINO, ALFRED Name: Name: 1601 MCCLOSKEY BLVD. Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33605 US Title: () Delete Title: MR. () Change (X) Addition Name: Name: BUESING, ROBERT 101 EAST KENNEDY BLVD. Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33601 US Title: () Delete Title: DR. () Change (X) Addition WALTER, LYDIA Name: Name: 2112 N. 15TYH ST. TAMPA, FL Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33605 US Title: () Delete Title: () Change (X) Addition PANECEK, LUANNE Name: Name: Address: Address: 1002 EAST PALM AVE. TAMPA, FL 33605 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID X. MCGERALD CEO 05/23/2008