Entity Name: HILLSBOROUGH COUNTY SCHOOL READINESS COALIT INC.	TION, Secretary of State 6197979246CC
Current Principal Place of Business:	
6800 NORTH DALE MABRY HIGHWAY	
TAMPA, FL 33614	
Current Mailing Address:	
6800 NORTH DALE MABRY HIGHWAY	
TAMPA, FL 33614 US	
FEI Number: 59-3626765	Certificate of Status Desired: No
Name and Address of Current Registered Agent:	
GILLETTE, GORDON L 6800 NORTH DALE MABRY HIGHWAY	
TAMPA, FL 33614 US	
<b>T</b>	
The above named entity submits this statement for the purpose of changing its registered office or register	red agent, or both, in the State of Florida.
SIGNATURE: GORDON L GILLETTE	04/19/2019

Electronic Signature of Registered Agent

## Officer/Director Detail :

Officer/Director Detail :					
Title	CHAIRMAN	Title	DIRECTOR		
Name	PATEL, AAKASH	Name	HANCOCK, BARBARA		
Address	3811 WEST PLATT ST APT A	Address	PO BOX 3408		
City-State-Zip:	TAMPA FL 33609	City-State-Zip:	TAMPA FL 33601		
Title	DIRECTOR	Title	DIRECTOR		
Name	ROBINSON, SHAWN DR.	Name	MURMAN, SANDRA		
Address	2112 N. 15TH STREET	Address	601 E KENNEDY BLVD		
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33602		
Title	DIRECTOR	Title	DIRECTOR		
Name	CHOWNING, ANGELA	Name	JENKINS, JACQUELYN DR.		
Address	3152 CLAY MAGNUM LANE	Address	3639 W WATERS AVE SUITE 500		
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618		
Title	DIRECTOR	Title	SECRETARY		
Name	PARRIS, KELLEY	Name	HILDRETH, LYNNE		
Address	1002 E PALM AVE	Address	3005 WEST EUCLID AVENUE		
City-State-Zip:	TAMPA FL 33605	City-State-Zip:	TAMPA FL 33629		

## Continues on page 2

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: GORDON GILLETTE	CEO	04/19/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 19, 2019

# 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N0000001023

# **Officer/Director Detail Continued :**

Address

610 S. ROME AVENUE

City-State-Zip: TAMPA FL 33606

Title	TREASURER	Title	DIRECTOR
Name	MCELROY, JOSEPH	Name	DEL CASTILLO, CARLOS
Address	401 E JACKSON STREET	Address	4145 S FALKENBURG RD
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	RIVERVIEW FL 33578
Title	DIRECTOR	Title	DIRECTOR
Name	BUZARD, LUKE A	Name	BROWN, TRACYE
Address	702 N FRANKLIN ST	Address	901 E KENNEDY BOULEVARD
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602
Title	DIRECTOR	Title	DIRECTOR
Name	HANCOCK, MARY	Name	JACOB, DIANNE
Address	10615 SOUTHERN POINTE BLVD	Address	201 N FRANKLIN ST 1500
City-State-Zip:	RIVERVIEW FL 33578	City-State-Zip:	TAMPA FL 33602
Title	DIRECTOR	Title	DIRECTOR
Name	FUDGE, DAPHNE DR.	Name	TONER, JODY
Address	18001 HUNTER'S OAK COURT	Address	4902 EISENHOWER BLVD SUITE 250
City-State-Zip:	TAMPA FL 33647	City-State-Zip:	TAMPA FL 33634
Title	CEO		
Name	GILLETTE, GORDON L	Title	DIRECTOR
Address	6800 N DALE MABRY HWY	Name	MAY, APRIL
City-State-Zip:	TAMPA FL 33614	Address	9393 NORTH FLORIDA AVENUE SUITE 900
Title	DIRECTOR	City-State-Zip:	TAMPA FL 33612
Name	GORDON, LESLENE	Title	DIRECTOR
Address	PO BOX 5135	Name	CINTRON, DAISY
City-State-Zip:	TAMPA FL 33675	Address	17512 LAKESHORE ROAD
Title	DIRECTOR	City-State-Zip:	LUTZ FL 33558
Name	FOX, LISE	Title	DIRECTOR
Address	13301 BRUCE B. DOWNS BLVD.	Name	HOLMQUIST JOHNSON, STEPHIE
City-State-Zip:	TAMPA FL 33612	Address	PO BOX 3546
Title	DIRECTOR	City-State-Zip:	PLANT CITY FL 33563
Name	OLSON, CANDY		