

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001023

Entity Name: HILLSBOROUGH COUNTY SCHOOL READINESS COALITION, INC.

FILED
Apr 12, 2013
Secretary of State
CC1618646338

Current Principal Place of Business:

1002 E. PALM AVENUE
TAMPA, FL 33605

Current Mailing Address:

1002 E. PALM AVENUE
TAMPA, FL 33605 US

FEI Number: 59-3626765

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCGERALD, DAVID X
1002 E. PALM AVENUE
TAMPA, FL 33605 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 CHAIRMAN
Name FILIBERTO, VALERO
Address 3411 W. COLUMBUS DR
City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name BARRISH, SCOTT
Address 10739 KEYS GATE DRIVE
City-State-Zip: RIVERVIEW FL 33579

Title SECRETARY
Name BUESING, ROBERT
Address 101 EAST KENNEDY BLVD.
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name BEVIS, DONNA M
Address 115 ADALIA AVENUE
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name REEVES, MICHAEL J
Address 101 EAST KENNEDY BLVD.
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name GREGORY, JANET K
Address 9393 NORTH FLORIDA AVENUE
SUITE 900
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name KIMES, DONNA
Address 5701 E HILLSBOROUGH
SUITE 2301
City-State-Zip: TAMPA FL 33619

Title DIRECTOR
Name PEACHY, EDWARD
Address 5100 W. KENNEDY AVE.
City-State-Zip: TAMPA FL 33609

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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: DAVID X. MCGERALD

CEO

04/12/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROBINSON, SHAWN
Address 2112 N. 15TH STREET
City-State-Zip: TAMPA FL 33605

Title DIRECTOR
Name FINNEY, LOUIS
Address 3639 W. WATERS AVE.
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name GASSEN, CARRIE
Address 420 BULLARD PKWY
City-State-Zip: TEMPLE TERRACE FL 33617

Title DIRECTOR
Name BROSS, MICHAEL
Address 3110 CLAY MAGNUM LANE
BUILDING 39
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name MURMAN, SANDRA
Address 201 E. KENNEDY
City-State-Zip: TAMPA FL 33605

Title DIRECTOR
Name RODRIGUEZ, CYNTHIA
Address 4901 N. HABANA AVE.
City-State-Zip: TAMPA FL 33614

Title DIRECTOR
Name GROSZ, PATRICIA
Address 1308 WEST SLIGH AVE
City-State-Zip: TAMPA FL 33604

Title CEO
Name MCGERALD, DAVID X
Address 1002 EAST PALM AVE.
City-State-Zip: TAMPA FL 33605