

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001023

Entity Name: HILLSBOROUGH COUNTY SCHOOL READINESS COALITION, INC.

FILED
Apr 01, 2017
Secretary of State
CC8209706327

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:

KNOBL, STEVE
6800 NORTH DALE MABRY HIGHWAY
TAMPA, FL 33614 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: STEVE KNOBL

04/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name PATEL, AAKASH
Address 3811 WEST PLATT ST APT A
City-State-Zip: TAMPA FL 33609

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

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

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

Title DIRECTOR
Name HANCOCK, BARBARA
Address PO BOX 3408
City-State-Zip: TAMPA FL 33601

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

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

Title DIRECTOR
Name MURMAN, SANDRA
Address 601 E KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

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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: STEVE KNOBL

CEO

04/01/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CHOWNING, ANGELA
Address 3152 CLAY MAGNUM LANE
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name DOUGLAS , HOLT DR.
Address P O BOX 5135
City-State-Zip: TAMPA FL 33675

Title DIRECTOR
Name PARRIS, KELLEY
Address 1002 E PALM AVE
City-State-Zip: TAMPA FL 33605

Title DIRECTOR
Name HAMMOND, JILL
Address 16190 BRUCE B DOWNS BLVD
SUITE 300
City-State-Zip: TAMPA FL 33647

Title TREASURER
Name MCELROY, JOSEPH
Address 401 E JACKSON STREET
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name BUZARD, LUKE A
Address 702 N FRANKLIN ST
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name MCEWEN, BRIAN
Address 3108 WEST AZEELE STREET
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name BROWN, TRACYE
Address 901 E KENNEDY BOULEVARD
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name JACOB, DIANNE
Address 201 N FRANKLIN ST
1500
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name FUDGE, DAPHNE DR.
Address 18001 HUNTER'S OAK COURT
City-State-Zip: TAMPA FL 33647

Title CEO
Name KNOBL, STEVE
Address 6800 N DALE MABRY HWY
158
City-State-Zip: TAMPA FL 33614

Title DIRECTOR
Name JENKINS, JACQUELYN DR.
Address 3639 W WATERS AVE
SUITE 500
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name CARACCIOLA, MARIE
Address 5701 EAST HILLSBOROUGH AVE
SUITE 2301
City-State-Zip: TAMPA FL 33610

Title SECRETARY
Name HILDRETH, LYNNE
Address 3005 WEST EUCLID AVENUE
City-State-Zip: TAMPA FL 33629

Title DIRECTOR
Name DEL CASTILLO, CARLOS
Address 4145 S FALKENBURG RD
City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name HANCOCK, MARY
Address 10615 SOUTHERN POINTE BLVD
City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name KILLINGSWORTH, BRIAN
Address ONE BUCCANEER PLACE
City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name HANCOCK, MARY
Address 10615 SOUTHERN POINTE BLVD
City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name WELCH, LIZ
Address 5020 W LINEBAUGH AVE
100
City-State-Zip: TAMPA FL 33624

