

**2020 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N00000001023

**FILED**  
**Oct 02, 2020**  
**Secretary of State**  
**5504414154CR**

**Entity Name:** HILLSBOROUGH COUNTY SCHOOL READINESS COALITION, INC.

**Current Principal Place of Business:**

6302 E DR MARTIN LUTHER KING JR BLVD  
SUITE 100  
TAMPA, FL 33619

**Current Mailing Address:**

6302 E MLK JR. BLVD  
SUITE 100  
TAMPA, FL 33619 US

**FEI Number: 59-3626765**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GILLETTE, GORDON L  
6302 E. MLK JR. BLVD  
SUITE 100  
TAMPA, FL 33619 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:** GORDON L GILLETTE

10/02/2020

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

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

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

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

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

Title SECRETARY  
Name HILDRETH, LYNNE  
Address 3005 WEST EUCLID AVENUE  
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:** GILLETTE , GORDON , L

CEO

10/02/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

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

Title           CEO  
Name           GILLETTE, GORDON L  
Address        6302 E DR MARTIN LUTHER KING JR BLVD  
                  SUITE 100  
City-State-Zip: TAMPA FL 33619

Title           DIRECTOR  
Name           GORDON, LESLENE  
Address        PO BOX 5135  
City-State-Zip: TAMPA FL 33675

Title           DIRECTOR  
Name           FOX, LISE  
Address        13301 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33612

Title           DIRECTOR  
Name           OLSON, CANDY  
Address        610 S. ROME AVENUE  
City-State-Zip: TAMPA FL 33606

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

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           TONER, JODY  
Address        4902 EISENHOWER BLVD  
                  SUITE 250  
City-State-Zip: TAMPA FL 33634

Title           DIRECTOR  
Name           MAY, APRIL  
Address        9393 NORTH FLORIDA AVENUE  
                  SUITE 900  
City-State-Zip: TAMPA FL 33612

Title           DIRECTOR  
Name           CINTRON, DAISY  
Address        17512 LAKESHORE ROAD  
City-State-Zip: LUTZ FL 33558

Title           DIRECTOR  
Name           HOLMQUIST JOHNSON, STEPHIE  
Address        PO BOX 3546  
City-State-Zip: PLANT CITY FL 33563