

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008985

**Entity Name:** EVERY CHILD A READER IN ESCAMBIA, INC.

**Current Principal Place of Business:**

212 SOUTH ALCANIZ STREET  
PENSACOLA, FL 32502

**Current Mailing Address:**

P.O. BOX 71  
PENSACOLA, FL 32591 US

**FEI Number: 26-1200860**

**Certificate of Status Desired: Yes**

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

EVERY CHILD A READER IN ESCAMBIA, INC  
212 SOUTH ALCANIZ STREET  
PENSACOLA, FL 32502 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: JASON CRAWFORD**

**01/10/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HOSMAN, JOHN  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title TREASURER  
Name BARFIELD, BETHANY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name EUGENE, FRANKLIN  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name GINNETTI, SCOTT  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name CRAWFORD, JASON  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title CEO  
Name CRAIG, KRISTY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name DURHAM, MATTHEW  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title SECRETARY  
Name MARTIN, CHRISTOPHER  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

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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: KRISTY CRAIG**

**EXECUTIVE DIRECTOR**

**01/10/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name EWERT, JESSICA  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name EDMONDS, KIMBERLY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name THURMAN, AMY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name RHODES, MELANIE  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name SHARP, JOY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name MCBRIDE, MEGAN  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title CHAIRMAN  
Name BELL, JODI  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name DOGAN, REGGIE  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name HUDGENS, WESLEY  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name MOORHEAD, STEPHEN  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name BODI, MIKE  
Address 212 SOUTH ALCANIZ STREET  
City-State-Zip: PENSACOLA FL 32502