2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008985

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

FILED Feb 04, 2021 Secretary of State 2362647533CC

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: No

Name and Address of Current Registered Agent:

HOSMAN, JOHN 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: JOHN HOSMAN 02/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title VC

NameHOSMAN, JOHNNameGROVE, JENNIFERAddress308 SOUTH ALCANIZ STREETAddress1717 N. E STREET

City-State-Zip: PENSACOLA FL 32502 City-State-Zip: PENSACOLA FL 32501

Title TREASURER Title DIRECTOR

Name BARFIELD, BETHANY Name FRANKLIN, EUGENE

Address 212 SOUTH ALCANIZ STREET Address P.O. BOX 71

City-State-Zip: PENSACOLA FL 32502 City-State-Zip: PENSACOLA FL 32591

Title DIRECTOR Title PRESIDENT

Name GINNETTI, SCOTT Name CRAWFORD, JASON

Address P.O. BOX 71 Address 212 SOUTH ALCANIZ STREET

City-State-Zip: PENSACOLA FL 32591 City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR Title CEO

Electronic Signature of Signing Officer/Director Detail

Name RIKER, MARY Name HARRISON, LEAH

Address 1000 COLLEGE BLVD. Address P.O. BOX 71

BLDG. 23 City-State-Zip: PENSACOLA FL 32591

City-State-Zip: PENSACOLA FL 32504

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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: JOHN HOSMAN

02/04/2021 Date

Officer/Director Detail Continued:

Title D Title D, S

Name DURHAM, MATTHEW Name MARTIN, CHRISTOPHER

Address 70 N BAYLEN ST Address 212 SOUTH ALCANIZ STREET

City-State-Zip: PENSACOLA FL 32502 City-State-Zip: PENSACOLA FL 32502

Title D, VP

NameEWERT, JESSICANameBELL, JODIAddress4951 GRANDE DRAddressP.O. BOX 71

City-State-Zip: PENSACOLA FL 32504 City-State-Zip: PENSACOLA FL 32591

TitleDIRECTORTitleDIRECTORNameEDMONDS, KIMNameREGGIE, DOGAN

Address P.O. BOX 71 Address P.O. BOX 71

City-State-Zip: PENSACOLA FL 32591 City-State-Zip: PENSACOLA FL 32591