DOCUMENT\# N38016
Entity Name: PASCO KIDS FIRST, INC.

## Current Principal Place of Business:

7344 LITTLE ROAD
NEW PORT RICHEY, FL 34654

## Current Mailing Address:

7344 LITTLE ROAD
NEW PORT RICHEY, FL 34654
FEI Number: 59-3010809
Certificate of Status Desired: No
Name and Address of Current Registered Agent:
HAMMOND, KEITH
8624 GOVERNMENT DRIVE
SUITE 101
NEW PORT RICHEY, FL 34654 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

## Officer/Director Detail :

| Title | DIRECTOR | Title | EXECUTIVE DIRECTOR |
| :--- | :--- | :--- | :--- |
| Name | SMITHWICK, ROSANNE | Name | PLOUFFE, KELLY |
| Address | 5404 MAIN STREET | Address | 7344 LITTLE ROAD |
| City-State-Zip: | NEW PORT RICHEY FL 34652 | City-State-Zip: | NEW PORT RICHEY FL 34654 |
| Title | CHAIRMAN |  |  |
| Name | SELTZER, ERIC | Title | DIRECTOR |
| Address | 7432 LITTLE ROAD | Name | FENTON, ROZ |
| City-State-Zip: | NEW PORT RICHEY FL 34654 | Address | 13632 OLD FLORIDA CIRCLE |
| Title | DIRECTOR | City-State-Zip: | HUDSON FL 34669 |
| Name | LEE, CINDY DR. | Title | VC |
| Address | 8406 MARLANAS PLACE | Name | FRIEDLANDER, PAUL |
| City-State-Zip: | TEMPLE TERRACE FL 33637 | Address | 4934 ORANGE GROVE WAY |
| Title | TREASURER | City-State-Zip: | PALM HARBOR FL 34684 |
| Name | BENE, PATRICK | Title | DIRECTOR |
| Address | 6204 SPOONBILL DRIVE | Name | PEARSON, CATHY |
| City-State-Zip: | NEW PORT RICHEY FL 34654 | Address | 8600 GALEN WILSON BOULEVARD |

## Continues on page 2

[^0]SIGNATURE: KELLY PLOUFFE
KPLOUFFE@PASCOKIDS 05/14/2019 FIRST.ORG

## Officer/Director Detail Continued :

Title SECRETARY
Name KILIAN, KEN
Address $\quad 7601$ LITTLE ROAD SUITE 200
City-State-Zip: NEW PORT RICHEY FL 34654


[^0]:    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.

