FILED Mar 13, 2001 8:00 am Secretary of State DOCUMENT # 716092 1. Entity Name COORDINATED CHILD CARE OF PINELLAS, INC. 03-13-2001 90120 001 *****8.75 03-13-2001 90120 002 ****52.50 Principal Place of Business Mailing Address 6698 68TH AVENUE NORTH 6698 68THE AVENUE NORTH SUITE B SUITE B PINELLAS PARK FL 34665 PINELLAS PARK FL 34665 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1295214 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) COOLEY, GUY M. 6698 68TH AVENUE NORT-SUITE B Zip Code PINELLAS PARK FL 34665 FL 8. The above named entity submits this statement withe purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature, typ DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Change ☐ Addition P NAME MILLER, MYRON M. DR. NAME Miller, Myron M. Dr. STREET ADDRESS STREET ADDRESS 6383 DARTMOUTH AVE., N 6383 Dartmouth Ave. N St. Petersburg FL.33710 CITY-ST-ZIP ST. PETERSBURG FL 33710 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change X Addition Dickson, Diana VITUCCI, JUDI NAME NAME 535 20th Ave NE STREET ADDRESS 7470-801 6TH ST S STREET ADDRESS CITY-ST-ZIP St. Petersburg FL 33704 SAINT PETERSBURG FL 33701 CITY-ST-7IP TITLE ☐ Delete TITLE X Change ☐ Addition HARRIS, CLARETHA NAME NAME Harris, Claretha STREET ADDRESS 2420 GRANADA CIRCLE SE STREET ADDRESS 400 Cleveland Street, 5th floor CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL 33712 Clearwater FL 33755 TITLE ☐ Delete TITLE ☐ Change X Addition NAME CARLSON, SUSAN NAME Finlaw-Dusseault, Susan STREET ADDRESS 150 2ND AVE NORTH STREET ADDRESS 655 2nd Ave S CITY-ST-ZIP CITY-ST-7IP ST-PETERSBURG:FL-33701= St. Petersburg FL 33701 TITI F ☐ Delete TITLE Change ☐ Addition NAME RIEMAN, LORETTA NAME Rieman, Loretta STREET ADDRESS **490 1ST AVE S** STREET ADDRESS PO BOX 1121 CITY-ST-ZIP ST. PETERSBURG FL 33701 CITY-ST-7IP St. Petersburg FL 33731 DTLE X Delete TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or tiru changed, or on an attachment with an address, with other like empowered

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

RINDA, BRUCE

1550 75TH CIRCLE NE

ST. PETERSBURG FL 33702

NAME

STREET ADDRESS

CITY-ST-ZIP

/ o /

Heverly, Cathy

3301 Jackson Street N

St. Petersburg FL 33704

394-0276

Change

▼ Addition

Additions to Directors

Title: D

Name: Karvonen, Marjorie

Street Address: 7360 14th Street NE City-ST-Zip: St. Petersburg FL 33702

Title: D

Name: Korsberg, Sue Ann

Street Address: 6727 Ranger Drive City-ST-Zip: Tampa FL 33615-2530

Title: D

Name: Spraggins, Vera

Street Address: 1388 62nd Terrace S City-ST-Zip: St. Petersburg FL 33705