5/1/

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State
05-01-2001 90051 050 ****70.00

DOCUMENT # N00000000404

1. Entity Name

INDIAN RIVER COUNTY SCHOOL READINESS COALITION,

Principal Place of Business	Mailing Address
601 21ST STREET,STE.310,P.O. BOX 1960 VERO BEACH FL 32961-1960	601 21ST STREET,STE.310,P.O. BOX 1960 VERO BEACH FL 32961-1960

- 46659

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
601 21st Street, Suite 330	P.O. Box 2591
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Vero Beach, FL	City & State: Vero Beach, FL
Zip: 32960 Country: USA	Zip: 32961-2591 Country: USA

4. FEI Number: 65-0980336 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POLACKWICH, ALAN S SR. 3333-20TH STREET VERO BEACH FL 32960	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition PC Alan S. Polackwich, Sr. (D) 3333 20th Street Vero Beach, FL 32960
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition V Susan Blaxill-Deal (D) 1503 W. Camino Del Rio Vero Beach, FL 32963
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition S Kathryn Marshall (D) 4350 43rd Ave. Vero Beach, FL 32967
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition T Dr. Roger Dearing (D) 1990 25th Street Vero Beach, FL 32960
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

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 or 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4-23-01 561-562-8111
SIGNATURE AND TYPED OR PRINTED NAME OF RESIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #