

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001023

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** HILLSBOROUGH COUNTY SCHOOL READINESS COALITION, INC.

**Current Principal Place of Business:**

1002 E. PALM AVENUE  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

1002 EAST PALM AVE.  
TAMPA, FL 33605

**New Mailing Address:**

**FEI Number:** 59-3626765      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MCGERALD, DAVID X  
1002 E. PALM AVENUE  
TAMPA, FL 33605 US

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

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

Date

**OFFICERS AND DIRECTORS:**

Title: DR. ( ) Delete  
Name: JURADO, MELODY  
Address: 5406 EAST RIVERHILLS DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: MS. ( ) Delete  
Name: STOLLER, LINDA  
Address: 8900 N. ARMENIA, STUIE 210  
City-St-Zip: TAMPA, FL 33604 US

Title: MR. ( ) Delete  
Name: VITTORINO, ALFRED  
Address: 1601 MCCLOSKEY BLVD.  
City-St-Zip: TAMPA, FL 33605 US

Title: MR. ( ) Delete  
Name: BUESING, ROBERT  
Address: 101 EAST KENNEDY BLVD.  
City-St-Zip: TAMPA, FL 33601 US

Title: DR. ( ) Delete  
Name: WALTER, LYDIA  
Address: 2112 N. 15TYH ST. TAMPA, FL  
City-St-Zip: TAMPA, FL 33605 US

Title: DR. ( ) Delete  
Name: PANECEK, LUANNE  
Address: 1002 EAST PALM AVE.  
City-St-Zip: TAMPA, FL 33605 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MS. (X) Change ( ) Addition  
Name: HARKNESS, MARINA  
Address: 5701 EAST HILLSBOROUGH AVE. SUITE 2301  
City-St-Zip: TAMPA, FL 33610

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID X. MCGERALD

Electronic Signature of Signing Officer or Director

MR.

03/25/2009

Date