2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# N00000001865

Entity Name: POLK COUNTY SCHOOL READINESS COALITION, INC.

Current Principal Place of Business:

1765 N. BROADWAY AVE
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

1765 N. BROADWAY AVE
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-3648316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARLAN, ELIZABETH
240 CRESCENT LAKE COURT
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

GIORDANO, KRIS
1765 N. BROADWAY AVE.
BARTOW, FL 33830 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: KRIS GIORDANO 03/26/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVCC ( ) Delete
Name: MCPHERSON, CHARLES
Address: 309 QUAILS RUN PASS
City-St-Zip: WINTER HAVEN, FL 33884

Title: DCC ( ) Delete
Name: HOLMES, ARTEMAS
Address: 2330 JONILA AVENUE
City-St-Zip: LAKELAND, FL 33813

Title: DCS ( ) Delete
Name: HIGHTOWER, SANDY
Address: 6870 LAKE CLARK DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition
Name: HOLMES, ARTEMAS
Address: 2330 JONILA AVE.
City-St-Zip: LAKELAND, FL 33803

Title: VC (X) Change ( ) Addition
Name: PLEWS, MARY JO
Address: 301 3RD ST., SUITE 200
City-St-Zip: WINTER HAVEN, FL 33884

Title: S (X) Change ( ) Addition
Name: HIGHTOWER, SANDY
Address: 6780 LAKE CLARK DR.
City-St-Zip: LAKELAND, FL 33813

Title: T ( ) Change (X) Addition
Name: GOLOTKO, PETER
Address: 1509 SOUTH FLORIDA AVE.
City-St-Zip: LAKELAND, FL 33803

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: KRIS GIORDANO CEO 03/26/2009
Electronic Signature of Signing Officer or Director Date