

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003099

FILED
Apr 30, 2009
Secretary of State

Entity Name: SCHOOL READINESS COALITION SERVING OKALOOSA AND WALTON COUNTIES, INC.

Current Principal Place of Business:

2018 LEWIS TURNER BOULEVARD
SUITE #C
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

2018 LEWIS TURNER BOULEVARD
SUITE #C
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 31-1745051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANCHORS, MICHELLE
909 MAR WALT DRIVE
SUITE 1014
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

ANCHORS, MICHELLE
909 MAR WALT DRIVE
SUITE 1022
FORT WALTON BEACH, FL 32547 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: MICHELLE ANCHORS

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REED, MARY LOU
Address: 109 8TH AVENUE
City-St-Zip: SHALIMAR, FL 32579

Title: VC (X) Delete
Name: WARREN, JILL
Address: 1405 29TH STREET
City-St-Zip: NICEVILLE, FL 32578

Title: TD () Delete
Name: KEEN, KRISTIN
Address: 4460 LENGENDARY DRIVE, STE 100
City-St-Zip: DESTIN, FL 32541

Title: CD () Delete
Name: SIMS, SANDRA F
Address: 140 HOLLYWOOD BLVD SW
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD () Delete
Name: FRANKLIN, PATRICIA
Address: 340 NW BEAL PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32547

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: CD (X) Change () Addition
Name: WARREN, JILL
Address: 1405 29TH STREET
City-St-Zip: NICEVILLE, FL 32578

Title: SD (X) Change () Addition
Name: FRANKLIN, PATRICIA
Address: 160 GOVERNMENTAL CENTER, SUITE 611
City-St-Zip: PENSACOLA, FL 32502-573

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: GLORIA W. MAYO

ED

04/30/2009

Electronic Signature of Signing Officer or Director

Date