

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90711 023 ****70.00

DOCUMENT # N00000003377

1. Entity Name

SUMTER COUNTY SCHOOL READINESS COALITION, INC.



Principal Place of Business

**103 A HUEY ST.
WILDWOOD FL 34785**

Mailing Address

**103 A HUEY ST.
WILDWOOD FL 34785**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3643092**

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

**CLEMONS, ELIZABETH M
301 W. MCCOLLUM AVE.
BUSHNELL FL 33513**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Elizabeth M. Clemons

Elizabeth M. Clemons, Chair

January 2, 2003

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCD
PIERCE, DEE
515 MAIN STREET
LEESBURG FL 34748** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D.
John T. Dixon
2680 W. CR 476
Bushnell, FL 33513** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TT
GRAY, IVORY
338 S MAIN STREET
WILDWOOD FL 34785** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/T
← Name/Address As Shown In # 10** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
EARL, GARY
1801 LEE RD., STE. 270
WINTER PARK FL 32789** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Darnell Stewart
1601 W. Gulf Atlantic Hwy.
Wildwood, FL 34785** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
FILLMON, TIM
3743 CR 721
WEBSTER FL 33597** ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Elizabeth M. Clemons **Elizabeth M. Clemons**

1/02/03

(352) 793-5405

(352) 748-4005

CR2E037 (10/02)