

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90029 043 ****61.25

DOCUMENT # N00000003477 1. Entity Name PINELLAS COUNTY SCHOOL READINESS COALITION, INC.			
Principal Place of Business 6698 68TH AVE NORTH STE A PINELLAS PARK FL 33781-5015		Mailing Address 6698 68TH AVE NORTH STE A PINELLAS PARK FL 33781-5015	
2. Principal Place of Business 11350 - 66th St N Suite, Apt. #, etc. Suite 120 City & State Largo FL Zip 33773		3. Mailing Address 11350 66th St N Suite, Apt. #, etc. Suite 120 City & State Largo FL Zip 33773	
4. FEI Number NO-T APPLICABLE		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CROFT, WINSTON 6698 68TH AVENUE NORTH PINELLAS PARK FL 33781-5060		7. Name and Address of New Registered Agent Name Chapman, Janet Street Address (P.O. Box Number is Not Acceptable) 11350 66th St N Suite 120 City Largo	
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 <i>Janet Chapman</i> 1-30-05 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 Due By May 1, 2005		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	CT HEILMAN, JOHN DR 205 DR. M.L. KING STREET N SAINT PETERSBURG FL 33701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT Dickson, V. James 150 Second Avenue N St Petersburg FL 33701 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT HEILMAN, JOHN DR. 500 7TH AVENUE SOUTH ST PERSBURGE FL 33733	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT Peachey, Edward 4525 140th Ave N, Ste 904 Clearwater FL 33762 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BRITT, LOUNELL 2355 22ND AVE S SAINT PETERSBURG FL 33712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Britt, Lounell 2355 22nd Ave S St Petersburg 33712 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT PEACHEY, EDWARD 4525 140TH AVE N, STE 906 CLEARWATER FL 33762	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST Elliot, Le Ann 3200 - 34th St S St Petersburg FL 33733 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BALZER, TERRI 11351 ULMERTON ROAD LARGO FL 33778 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCT DICKSON, JAMES 150 SECOND AVE N SAINT PETERSBURG FL 33701	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: *Janet Chapman* *Janet Chapman* 1/30/05 727548
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #