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Apr 04, 2001 8:00 am
Secretary of State
04-04-2001 90496 037 ****70.00

MAR-22-2001 08:40 FROM:CDS OCALA FL 3526208850 TO:

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005488

A00042814

1. Entity Name

HERNANDO COUNTY SCHOOL READINESS COALITION, INC.

Principal Place of Business	Mailing Address
Hernando CDS 20162 Cortez Blvd. Brooksville, FL 34601	Doris J. Bedell 5196 Hope Lane Spring Hill, FL 34606

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / County	Zip / County

4. FEI Number 59-3681001 ☐ 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
Doris J. Bedell 5196 Hope Lane Spring Hill, FL 34606	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.

SIGNATURE _____ 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 Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
CD WRIGHT, WESLEY 4348 ORIOLE AVE SPRING HILL FL 34608	☐ Delete	CD Doris J. Bedell 5196 Hope Lane Spring Hill, FL 34606	☐ Change ☐ Addition
SD BEDELL, DORIS J 5196 HOPE LANE SPRING HILL FL 34606	☐ Delete	SD Joyce Brooks 5454 Sandra Drive Spring Hill, FL 34607	☐ Change ☐ Addition
VD EVERETT, JUDITH J 835 SCHOOL STREET BROOKSVILLE FL 34601	☐ Delete	VD Judith Everett 900 Emerson Road ~~Brooksville, FL 34601~~	☐ Change ☐ Addition
TD FOY, LINDA 835 SCHOOL STREET BROOKSVILLE FL 34601	☐ Delete	TD Linda Foy 1601 NE 25th Ave. ~~Ocala, FL 34470~~	☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

CR8E037 (10/00)

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: Doris J. Bedell Doris J. Bedell 352-688-8141

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Name — Date