2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003802

FILED Jan 23, 2004 Secretary of State

Entity Name: GADSDEN COUNTY SCHOOL READINESS COALITION, INC.

Current Principal Place of Business: New Principal Place of Business: 325 JOHN KNOX ROAD BLDG. F-140 TALLAHASSEE, FL 32303 **New Mailing Address: Current Mailing Address:** 325 JOHN KNOX ROAD BLDG. F-140 TALLAHASSEE, FL 32303 FEI Number: 59-3754424 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUGGAN, CHRIS 325 JOHN KNOX ROAD BLDG. F-140 TALLAHASSEE, FL 32303 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: EXD () Delete () Change () Addition DUGGAN, CHRIS Name: Name: 325 JOHN KNOX ROAD, BLDG. F-140 Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: CD () Delete Title: CD (X) Change () Addition PRUETT, REBECCA Name: MCKINNON, HOWARD Name: Address: 1339 E. LAFAYETTE ST Address: PO BOX 1799 City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: QUINCY, FL 32351 Title: () Delete Title: VCD (X) Change () Addition MCKINNON, HOWARD MCLEMORE, DANNY Name: Name: Address: POST OFFICE BOX 1799 Address: PO BOX 2009 City-St-Zip: QUINCY, FL 32351 City-St-Zip: QUINCY, FL 32351 (X) Change () Addition Title: () Delete Title: Name: WEAVER, BARBARA Name: FEAVER, ED 512 MARTIN LUTHER KING BLVD. Address: Address: 115 BYRD ROAD City-St-Zip: QUINCY, FL 32351 City-St-Zip: QUINCY, FL 32351 Title: () Delete Title: (X) Change () Addition FEAVER, ED PRUETT, REBECCA Name: Name: 1339 E. LAFAYETTE STREET 115 BYRD ROAD Address: Address: City-St-Zip: QUINCY, FL 32351 City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHRIS DUGGAN EXD 01/23/2004