

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000922

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** I CAN COMMUNITY EDUCATION COALITION, INC.

**Current Principal Place of Business:**

5118 N. 56TH ST., STE 123  
TAMPA, FL 33610

**New Principal Place of Business:**

4809 E. BUSCH BLVD  
SUITE 201  
TAMPA, FL 33617

**Current Mailing Address:**

PO BOX 11484  
TAMPA, FL 336801484

**New Mailing Address:**

**FEI Number:** 30-0019284      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TATE-MARTIN, MICHELLE  
7803 LEMONWOOD COURT  
TEMPLE TERRACE, FL 33637      US

**Name and Address of New Registered Agent:**

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:**

Title: P      ( ) Delete  
Name: NORIEGA, MICHELE  
Address: 9109 SHELDON WEST DR  
City-St-Zip: TAMPA, FL 33626

Title: V      ( ) Delete  
Name: HAYNES-BOTCHWAY, PATRICIA  
Address: 11205 KILLEARN COURT  
City-St-Zip: RIVERVIEW, FL 33569

Title: S      ( ) Delete  
Name: LOPEZ, MONICA P.  
Address: 4207 S. DALE MABRY HWY, #11209  
City-St-Zip: TAMPA, FL 33611

Title: D      (X) Delete  
Name: WIGGINS, ERVIN  
Address: 11728 N 14TH ST APT 14  
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES      (X) Change ( ) Addition  
Name: CROCKER, CORY  
Address: 8611 N. 11TH ST  
City-St-Zip: TAMPA, FL 33604

Title: SEC      (X) Change ( ) Addition  
Name: EDWARDS, LISA  
Address: 1510 HAVEN BEND  
City-St-Zip: TAMPA, FL 33613

Title: TREA      (X) Change ( ) Addition  
Name: NORIEGA, MICHELE  
Address: 9109 SHELDON WEST DR  
City-St-Zip: TAMPA, FL 33626

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHELLE TATE-MARTIN

ED

02/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date