

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N30620

FILED  
Mar 17, 2002 8:00 AM  
Secretary of State

Entity Name: READ PINELLAS, INC.

## Current Principal Place of Business:

C/O DIRECTOR OF ADULT & COMMUNITY ED.  
301 4TH ST SW  
LARGO, FL 34640

## New Principal Place of Business:

## Current Mailing Address:

3035 66TH AVENUE  
#59  
SAINT PETERSBURG, FL 33702

## New Mailing Address:

FEI Number: 59-2962210      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GILDRIE, VIRGINIA R.  
3035 66TH AVENUE NORTH  
#59  
ST. PETERSBURG, FL 33702 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: DP ( ) Delete  
Name: LIGHT, BRENDA  
Address: 12805 HARBORWOOD DR  
City-St-Zip: LARGO, FL 33774

Title: T ( ) Delete  
Name: GILDRIE, VIRGINIA R  
Address: 3035 66TH AVE., NO 59  
City-St-Zip: ST PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: ROSS, DOTTIE  
Address: 300 STATE RD 58  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: THURSBY, SANDRA  
Address: 3521 IVORY TERRACE  
City-St-Zip: NEW PORT RICHEY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: PUTNAM, MARY  
Address: 6801 GREENBRIER DRIVE  
City-St-Zip: SEMINOLE, FL 33777

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

Title: D (X) Change ( ) Addition  
Name: TAYLOR, SHARON  
Address: 14239 DICKEY ROAD  
City-St-Zip: PARRISH, FL 34219

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

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: VIRGINIA R. GILDRIE

TD

03/17/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date