

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000001559

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: HILLSBOROUGH FAMILY READING COUNCIL INC.

Current Principal Place of Business:

703 N WILLOW AVE
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

703 N WILLOW AVE
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-3307890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIGGS, LUCY
703 NO. WILLOW STREET
TAMPA, FL 33606

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: STD () Delete
Name: GRIGGS, LUCY
Address: 703 N WILLOW AVE
City-St-Zip: TAMPA, FL 33606

Title: VD () Delete
Name: MILLER, JESSE
Address: 909 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33609

Title: PD () Delete
Name: SMITH, TROY
Address: 4817 N. FLORIDA AVE.
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: LUCY GRIGGS

ST

04/30/2002

Electronic Signature of Signing Officer or Director

Date