

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002353

FILED
Apr 08, 2008
Secretary of State

Entity Name: CLAY COUNTY LITERACY COALITION, INC.

Current Principal Place of Business:

2306 KINGSLEY AVE
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

2306 KINGSLEY AVE
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 59-3306235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, PATRICIA
2306 KINGSLEY AVE
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

HORD, JAMES C
2306 KINGSLEY AVE
ORANGE PARK, FL 32073 US

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: JAMES C. HORD

04/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: COFFMAN, PAT
Address: 2306 KINGSLEY AVE WING A
City-St-Zip: ORANGE PARK, FL 32073

Title: P () Delete
Name: HASH, VIRGINIA
Address: 2306 KINGSLEY AVE WING A
City-St-Zip: ORANGE PARK, FL 32073

Title: S () Delete
Name: WESTON, PHYLLIS
Address: 2306 KINGSLEY AVENUE, WING A
City-St-Zip: ORANGE PARK, FL 32073

Title: TD () Delete
Name: SHIPP, BARBARA
Address: 2306 KINGSLEY AVE WING A
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: MCDONALD, PATRICIA
Address: 2306 KINGSLEY AVENUE, WING A
City-St-Zip: ORANGE PARK, FL 32073

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:

Title: D (X) Change () Addition
Name: SHIPP, BARBRA
Address: 2306 KINGSLEY AVE WING A
City-St-Zip: ORANGE PARK, FL 32073

Title: T (X) Change () Addition
Name: HORD, JAMES
Address: 2306 KINGSLEY AVENUE, WING A
City-St-Zip: ORANGE PARK, FL 32073

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: JAMES C HORD

T

04/08/2008

Electronic Signature of Signing Officer or Director

Date