2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000007566

FILED Sep 20, 2006 Secretary of State

Entity Name: SANTA ROSA COUNTY SCHOOL READINESS COALITION, INC.

Current Principal Place of Business: New Principal Place of Business:

5236 WILLING STREET 8668 NAVARRE PARKWAY MILTON, FL 32570

141

NAVARRE, FL 32566

Current Mailing Address: New Mailing Address:

8668 NAVARRE PARKWAY P.O. BOX 893 MILTON, FL 32572 #14

NAVARRE, FL 32566

FEI Number: 59-3613068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BRACKEN, MELISSA M EXE DIR BRACKEN, MELISSA M EXE DIR P.O. BOX 893 8668 NAVARRE PARKWAY #141

MILTON, FL 32572 NAVARRE, FL 32566 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: MELISSA BRACKEN 09/20/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

VALLIANOS, FRED DR VALLIANOS, FRED DR Name: Name: 1407 SOUND RETREAT DRIVE Address: 3301 VILLAGE GREEN DR Address:

City-St-Zip: NAVARRE, FL 32566 City-St-Zip: PACE, FL 32571

Title: VCD () Delete Title: SD (X) Change () Addition

MILLER, JEWELL Name: HIGHFILL, LESLIE J RN Name: Address: 6274 GREENWOOD DRIVE Address: P.O. BOX 929

City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32572

Title: () Delete Title: (X) Change () Addition

COBB, RENEE SPORT, JILL Name: Name: 75 FAIRPOINT DRIVE 5060 WOODBINE DRIVE Address: Address:

City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: PACE, FL 32571

Title: TD (X) Delete Title: () Change () Addition Name:

HESTER, GRADY Name: 6312 HAPPY LANE Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: FRED VALLIANOS VCD 09/20/2006