

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007566

FILED
Mar 20, 2007
Secretary of State

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

Current Principal Place of Business:

8668 NAVARRE PARKWAY
141
NAVARRE, FL 32566

New Principal Place of Business:

6564 CAROLINE STREET
MILTON, FL 32570

Current Mailing Address:

8668 NAVARRE PARKWAY
#14
NAVARRE, FL 32566

New Mailing Address:

6564 CAROLINE STREET
MILTON, FL 32570

FEI Number: 59-3613068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRACKEN, MELISSA M EXE DIR
8668 NAVARRE PARKWAY #141
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

BRACKEN, MELISSA M EXE DIR
6564 CAROLINE STREET
MILTON, FL 32570 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

03/20/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCD () Delete
Name: VALLIANOS, FRED DR
Address: 3301 VILLAGE GREEN DR
City-St-Zip: PACE, FL 32571

Title: SD () Delete
Name: HIGHFILL, LESLIE J RN
Address: P.O. BOX 929
City-St-Zip: MILTON, FL 32572

Title: TD () Delete
Name: SPORT, JILL
Address: 5060 WOODBINE DRIVE
City-St-Zip: PACE, FL 32571

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: SPORT, JILL B CPA
Address: 5060 WOODBINE DRIVE
City-St-Zip: PACE, FL 32571

Title: VCD (X) Change () Addition
Name: VALLIANOS, FRED DR.
Address: 3301 VILLAGE GREEN DRIVE
City-St-Zip: PACE, FL 32572

Title: SD (X) Change () Addition
Name: HIGHFILL, LESLIE J RN
Address: P.O. BOX 929
City-St-Zip: MILTON, FL 32572

Title: TD () Change (X) Addition
Name: POPE, KAREN
Address: 1000 COLLEGE BLVD.
City-St-Zip: PENSACOLA, FL 32504

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: JILL SPORT

CD

03/20/2007

Electronic Signature of Signing Officer or Director

Date