

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747853

Entity Name: THE FLORIDA CENTER FOR EARLY CHILDHOOD, INC.**Current Principal Place of Business:**4620 17TH ST
SARASOTA, FL 34235**Current Mailing Address:**4620 17TH ST
SARASOTA, FL 34235 US**FEI Number: 59-1947024****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SKOGLUND, KRISTIE
4620 17TH STREET
SARASOTA, FL 34235 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CFO
Name MILLER, CHARMIAN
Address 4620 17TH STREET
City-State-Zip: SARASOTA FL 34235

Title DIRECTOR
Name SLAYTON, AMBER
Address 4519 BENT TREE BLVD.
City-State-Zip: SARASOTA FL 34241

Title VC
Name DUNLAP, MELISSA
Address 1388 HARBOR DRIVE
City-State-Zip: SARASOTA FL 34239

Title CHAIRMAN
Name WOODIN, JEFF
Address 7125 FRUITVILLE RD.
PMB 1715
City-State-Zip: SARASOTA FL 34240

Title DIRECTOR
Name LAWMAN, LARRY
Address 368 RENOIR DRIVE
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name HOLDER, DOUGLAS
Address 318 ISLAND CIRCLE
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name PINKERTON, SCOTT
Address 310 W. VENICE AVE.
201
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name STRELKOV, OLGA
Address 2601 CATTLEMEN RD., STE. 201
City-State-Zip: SARASOTA FL 34232

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: CHARMIAN MILLER**CFO****03/09/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEVITT, STEVE
Address 126 S. OSPREY AVE.
City-State-Zip: SARASOTA FL 34236

Title PRESIDENT
Name SKOGLUND, KRISTIE DR.
Address 6456 FOX GRAPE LANE
City-State-Zip: BRADENTON FL 34202

Title DIRECTOR
Name WATKINS, DANA
Address 4015 CENTER POINTE PLACE
City-State-Zip: SARASOTA FL 34233

Title DIRECTOR
Name WALSH, MELISSA
Address 240 S. PINEAPPLE AVE.
City-State-Zip: SARASOTA FL 34235

Title SECRETARY
Name LEGLER, EMMALEE
Address 2221 8TH ST.
City-State-Zip: SARASOTA FL 34237

Title TREASURER
Name MILLER, MICHELLE
Address 20820 SWALLOWTAIL COURT
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name PEREZ-RUBERTE, EDDIE
Address 2985 DREW STREET
City-State-Zip: CLEARWATER FL 33759