#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007325

Entity Name: THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY,

INC.

Mar 22, 2022 **Secretary of State** 7350345205CC

03/22/2022

Date

**FILED** 

#### **Current Principal Place of Business:**

516 NORTH ADAMS STREET TALLAHASSEE, FL 32301

# **Current Mailing Address:**

516 NORTH ADAMS STREET TALLAHASSEE, FL 32301

FEI Number: 26-0587238 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

FIELDS, EVANGELINE 516 NORTH ADAMS STREET TALLAHASSEE, FL 32301 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: EVANGELINE FIELDS

Electronic Signature of Registered Agent

# Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR Name FRANGIONE, CHRIS Name BUSH, JEB JR.

Address 516 NORTH ADAMS STREET Address 516 NORTH ADAMS STREET City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title **CFO** Title **DIRECTOR** 

FIELDS, EVANGELINE Name BUSH-KOCH, DOROTHY Name

Address 516 NORTH ADAMS STREET Address 516 NORTH ADAMS STREET City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301

Title **DIRECTOR** Title **PRESIDENT** 

Name VIROSTEK, GWYNN ROBINSON, BRITISH AUGUST Name

Address 516 NORTH ADAMS STREET 516 NORTH ADAMS STREET Address City-State-Zip: TALLAHASSEE FL 32301

City-State-Zip: TALLAHASSEE FL 32301

**DIRECTOR** Title Title **DIRECTOR** Name PINA. CHRISTINA WACHS, LORI Name

Address 516 NORTH ADAMS STREET Address 516 NORTH ADAMS STREET

TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip:

## 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: EVANGELINE FIELDS

**CFO** 

03/22/2022

## Officer/Director Detail Continued:

Title DIRECTOR
Name RISHER, DAVID

Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR

Name HIRSHFIELD, LYNN

Address 516 NORTH ADAMS STREET

City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY
Name TORR, DENINE

Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title TREASURER
Name BUNTS`, LAMAR

Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR

Name MUSHAHWAR, RACHEL

Address 516 NORTH ADAMS STREET

City-State-Zip: TALLAHASSEE FL 32301