

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007325

Entity Name: THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY, INC.**FILED**
Feb 01, 2024
Secretary of State
3010015075CC**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****02/01/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** DIRECTOR
Name FRANGIONE, CHRIS
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**Title** DIRECTOR
Name BUSH, JEB JR.
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**Title** DIRECTOR
Name BUSH-KOCH, DOROTHY
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**Title** CFO
Name FIELDS, EVANGELINE
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**Title** DIRECTOR
Name VIROSTEK, GWYNN
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**Title** CHAIRMAN
Name WACHS, LORI
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** VC
Name TORR, DENINE
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301**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****02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEVINE, MICHAEL
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title PRESIDENT
Name ROBERTS, ANDREW
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name KOCH, ROBERT
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name ROGOFF, ALICE
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY
Name SKINNER, HONEY
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name FISHER, FRANCES
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name RODRIGUEZ, RAQUEL
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301