

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007325

Entity Name: THE BARBARA BUSH FOUNDATION FOR FAMILY LITERACY, INC.**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:** No**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

02/21/2023

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 PRESIDENT
Name ROBINSON, BRITISH AUGUST
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 DIRECTOR
Name WACHS, LORI
Address 516 NORTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

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

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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

02/21/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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