

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006846

Entity Name: EARLY LEARNING COALITION OF MARION COUNTY, INC.**Current Principal Place of Business:**3304 SE LAKE WEIR AVENUE
SUITE 2
OCALA, FL 34471**Current Mailing Address:**3304 SE LAKE WEIR AVENUE
SUITE 2
OCALA, FL 34471**FEI Number:** 59-3627759**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GIBSON, GEORGE CHAIR
3304 SE LAKE WEIR AVENUE
OCALA, FL 34471 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 D
Name WOODRING, KATHLEEN DIRECTO
Address 3003 SW COLLEGE RD. SUITE 305
City-State-Zip: Ocala FL 34474

Title PVC
Name CARPENTER, MARSHA
Address 1601 WEST GULF ATLANTIC HWY.
City-State-Zip: WILDWOOD FL 34785

Title D
Name FORD, BRENDA DIRECTO
Address 1900 SE 18TH AVENUE
City-State-Zip: Ocala FL 34471

Title CHAIRMAN
Name GIBSON, GEORGE
Address 7651 SW HIGHWAY 200, SUITE 306
City-State-Zip: Ocala FL 34476

Title V-C
Name GONZALEZ, LOLA
Address 108 N MAGNOLIA AVE.
City-State-Zip: Ocala FL 34475

Title T
Name LEWIS, ANGIE
Address 1122 NE 36TH AVE
City-State-Zip: Ocala FL 34470

Title D
Name OLSTEIN, PHILIP
Address 201 SW 2ND STREET
City-State-Zip: Ocala FL 34471

Title D
Name HANCOCK, MELISSA
Address 4 SE BROADWAY ST
City-State-Zip: Ocala FL 34471

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: GEORGE GIBSON

CHAIRMAN

02/17/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D
Name	WATERS, LUZONIA
Address	1601 NE 25TH AVE SUITE 900
City-State-Zip:	OCALA FL 34470
Title	D
Name	HATTEN, JOAN
Address	5490 NW 13TH PLACE
City-State-Zip:	OCALA FL 34482
Title	D
Name	MOORE, DAVID COMMISSIONER
Address	612 SE 25TH AVENUE
City-State-Zip:	OCALA FL 34471
Title	D
Name	SEIFFER, LISA
Address	1930 SW 38TH AVENUE
City-State-Zip:	OCALA FL 34474
Title	D
Name	HOUGH, LYNN
Address	P.O. BOX 2408
City-State-Zip:	OCALA FL 34474
Title	D
Name	BOWE, DEBBIE
Address	P.O. BOX 1388
City-State-Zip:	OCALA FL 34478
Title	D
Name	DELCAMP, JOHN PASTOR
Address	206 MIDWAY ROAD
City-State-Zip:	OCALA FL 34472
Title	D
Name	HANCOCK , MELISSA
Address	4 SE BROADWAY ST
City-State-Zip:	OCALA FL 34471
Title	D
Name	BORING, LORI
Address	1409 E SILVER SPRINGS BLVD
City-State-Zip:	OCALA FL 34470
Title	D
Name	D'AIUTO, WILLIAM
Address	400 W ROBINSON STREET SUITE 1129
City-State-Zip:	ORLANDO FL 32801

Title	D
Name	BORING, LORI
Address	1409 E SILVER SPRINGS BLVD
City-State-Zip:	OCALA FL 34470
Title	D
Name	DEWESE , ANNA
Address	BLDG 24 K-12 ACADEMIC SRVS 1614 SE FT. KING STREET
City-State-Zip:	OCALA FL 34471
Title	D
Name	CRUZ, JOSUE
Address	716 E SILVER SPRINGS BLVD
City-State-Zip:	OCALA FL 34470
Title	D
Name	MOON, HOWARD
Address	4215 SE 59TH STREET
City-State-Zip:	OCALA FL 34480
Title	D
Name	LOPEZ, PAOLA
Address	518 SW 60TH AVENUE
City-State-Zip:	OCALA FL 34474
Title	D
Name	HORTON, DANIEL
Address	525 NE SANCHEZ AVENUE
City-State-Zip:	OCALA FL 34470
Title	D
Name	OLSTEIN, PHILIP
Address	201 SW 2ND STREET
City-State-Zip:	OCALA FL 34471
Title	D
Name	WATERS, LUZONIA
Address	1601 NE 25TH AVE SUITE 900
City-State-Zip:	OCALA FL 34470
Title	S
Name	LEWIS, ANGIE
Address	1122 NE 36TH AVENUE
City-State-Zip:	OCALA FL 34470
Title	D
Name	HATTEN, JOAN
Address	5490 NW 13TH PLACE
City-State-Zip:	OCALA FL 34482
Title	D

Title D
Name DEWESE , ANNA
Address BLDG 24 K-12 ACADEMIC SRVS
1614 SE FT. KING STREET
City-State-Zip: OCALA FL 34471

Title D
Name CRUZ, JOSUE
Address 716 E SILVER SPRINGS BLVD
City-State-Zip: OCALA FL 34470

Title D
Name MOON, HOWARD
Address 4215 SE 59TH STREET
City-State-Zip: OCALA FL 34480

Title D
Name LOPEZ, PAOLA
Address 518 SW 60TH AVENUE
City-State-Zip: OCALA FL 34474

Title D
Name HORTON, DANIEL
Address 525 NE SANCHEZ AVENUE
City-State-Zip: OCALA FL 34470

Title S
Name COLEN, ROBERT
Address 8449 SW 99TH ROAD
City-State-Zip: OCALA FL 34481

Name MOORE, DAVID COMMISSIONER
Address 612 SE 25TH AVENUE
City-State-Zip: OCALA FL 34471

Title D
Name SEIFFER, LISA
Address 1930 SW 38TH AVENUE
City-State-Zip: OCALA FL 34474

Title D
Name HOUGH, LYNN
Address P.O. BOX 2408
City-State-Zip: OCALA FL 34474

Title D
Name BOWE, DEBBIE
Address P.O. BOX 1388
City-State-Zip: OCALA FL 34478

Title D
Name DELCAMP, JOHN PASTOR
Address 206 MIDWAY ROAD
City-State-Zip: OCALA FL 34472

Title D
Name BRANT, ROBERTA
Address 4440 SE 106TH ST
City-State-Zip: BELLEVIEW FL 34420