

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90037 004 ****61.25

0055365

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 704069
 1. Corporation Name
PINELLAS CLASSROOM TEACHERS ASSOCIATION, INC.

Principal Place of Business 650 SEMINOLE BLVD LARGO FL 34640-0625	Mailing Address 650 SEMINOLE BLVD LARGO FL 34640-0625
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 05/21/1962
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-0974339
City & State 23	City & State 28	Applied For Not Applicable
Zip 33770	Country 25	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 33770	Country 29	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MOORE, JADE T
 94 BAYWOOD AVENUE
 CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 FL 85 Zip Code 33765

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P BACON, LINDA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1722 SOLAR DR	1.2 NAME	
STREET ADDRESS	HOLIDAY FL 34691	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VP MCMAHON, ROB	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	117 COUNTRY VILLAS DR	2.2 NAME	
STREET ADDRESS	SAFETY HARBOR FL 34695	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	P SMITH, GLORIA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2107 CANTERBURY LANE	3.2 NAME	
STREET ADDRESS	LARGO FL 33770	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D SCHROYER, SALLIE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4724 WYOMING AVE	4.2 NAME	
STREET ADDRESS	TAMPA FL 33616	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D TEETOR, BARBARA	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8190 57TH ST NO	5.2 NAME	
STREET ADDRESS	PINELLAS PARK FL 33781	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D BLACK, KIM	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	990 7TH AVENUE NE	6.2 NAME	
STREET ADDRESS	ST PETERSBURG FL 33734	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda T. Bacon* **REQUIRED** 01/11/99 (727) 585-6518
 Linda T. Bacon, President Date Daytime Phone #

CR2E037 (1/198)

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Pinellas Classroom Teachers Assoc

Officers and Directors

P

BACON, LINDA
1722 SOLAR DRIVE
HOLIDAY, FL 34691

L

UNDERWOOD, CAROLYN
2225 NURSERY ROAD
BLDG. 30, APT. 105
CLEARWATER, FL 33764

VP

MCMAHON, ROB
117 COUNTRY VILLAS DRIVE
SAFETY HARBOR, FL 34695

D

SCHROYER, SALLIE
4724 WYOMING AVENUE
TAMPA, FL 33616

P

SMITH, GLORIA
2107 CANTERBURY LANE
LARGO, FL 33770

D

TEETOR, BARBARA
8190 57TH STREET NO.
PINELLAS PARK, FL 33781

FRCH

LOFTON, CAROLYN
1641 WILDWOOD ROAD
CLEARWATER, FL 33756

D

BLACK, KIM
990 7TH AVENUE N.E.
LARGO, FL 33770

D

ASKINS, TERRY
15912 NORTHLAKE VILLAGE DRIVE SO.
ODESSA, FL 33556

D

KOEHLER SADLER, MIA
P.O. BOX 7985
ST. PETERSBURG, FL 33734

D

BRELSFORD, SUSAN
205 WOODWARD AVENUE
OLDSMAR, FL 34677

D

SEAVER, ROBERT
845 13TH COURT S.W.
LARGO, FL 33770

D

PASER, WENDY
3013 SARAH DRIVE
CLEARWATER, FL 33759

D

KLIEGER, DIANE
10171 12TH WAY NO., #102
ST. PETERSBURG, FL 33716