2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704069

FILED Feb 10, 2004 Secretary of State

Entity Name: PINELLAS CLASSROOM TEACHERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 650 SEMINOLE BLVD LARGO, FL 33770 **Current Mailing Address: New Mailing Address:** 650 SEMINOLE BLVD LARGO, FL 346400625 FEI Number: 59-0974339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOORE, JADE T 94 BAYWOOD AVENUE CLEARWATER, FL 34625 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MCMAHON, ROB DENNARD, MICHELLE Name: Name: 117 COUNTRY VILLAS DR Address: 3616 CARMEN ST Address: City-St-Zip: SAFETY HARBOR, FL 34635 City-St-Zip: TAMPA, FL 33609 Title: () Delete Title: (X) Change () Addition DENNAND, MICHELLE Name: Name: BARBARA, WILMARTH Address: 3616 CARMEN ST Address: 6305 40TH AVE N City-St-Zip: TAMPA, FL 33609 City-St-Zip: ST PETERSBURG, FL 33709 Title: () Delete Title: (X) Change () Addition GALYEN, JERRY Name: CAROLYN, UNDERWOOD Name: 1553 AMBROSIA DR Address: Address: 712 CANTERBURY RD City-St-Zip: CLEARWATER, FL 33764 City-St-Zip: CLEARWATER, FL 33764 Title: () Delete Title: () Change () Addition Name: MANNING, LINDA Name: 3525 FAIR WAY FOREST DR Address: Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: Title: Title: () Delete () Change () Addition MYERS, BARBI Name: Name: 360 DUNCAN LOOP E #302 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: () Delete Title: () Change () Addition WILMARTH, STU Name: Name: Address: 7958 11TH AVE Address: SAINT PETERSBURG, FL 33707 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHELLE DENNARD P 02/10/2004