

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 769447 (4)

1. Corporation Name
SEA PARK ELEMENTARY SCHOOL PARENTS COMMITTEE, INC.



Principal Place of Business: 300 SEA PARK BLVD. SATELLITE BEACH FL 32937
Mailing Address: 300 SEA PARK BLVD. SATELLITE BEACH FL 32937

3. Date Incorporated or Qualified: 07/19/1983
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: 59-2109661
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: PICHARD, BARRY K. 412 WARD RD SW PALM BAY FL 32908
10. Name and Address of New Registered Agent: (81) Name (82) Street Address (83) (84) City (85) Zip Code FL

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not stating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD PARKER, LISA S 130 A CROTON SATELLITE BEACH FL <input checked="" type="checkbox"/> DELETE	1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	CD MONAHAN, Bernadette 416 Res Sam way SATELLITE BEACH, FL 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VCD AITKEN, BRENDA 380 BERKLY ST SATELLITE BEACH FL <input type="checkbox"/> DELETE	2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S FREESE, SYDNEY 404 PENGUIN DR SATELLITE BEACH FL <input checked="" type="checkbox"/> DELETE	3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	S BRICKWEB, ALEXA 156 Hedgegrove Ave SATELLITE BEACH, FL 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T BERRYHILL, MELISSA 340 A S PALM DR SATELLITE BEACH FL <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	T JAYNA SNYDER 112 Hedgegrove Ave SATELLITE BEACH, FL 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	600001750878 -03/20/96--01052--000 ***61.25 007 3-20-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: _____ Date: 2/2/96 Daytime Phone #: 779-9104
Signature and typed or printed name of signing officer or director

CR2E037 (12/95)