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Mar 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mo'ham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 769447 (4)

1. Corporation Name

SEA PARK ELEMENTARY SCHOOL PARENTS COMMITTEE, IN
C.

Principal Place of Business

Mailing Address

300 SEA PARK BLVD.
SATELLITE BEACH FL 32937300 SEA PARK BLVD.
SATELLITE BEACH FL 32937-2118

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified
07/19/19833a. Date of Last Report
03/20/19964. FEI Number
59-2109661Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PICHARD, BARRY K.
412 WARD RD SW
PALM BAY FL 32908

81 Name

Dr. Joseph F. O'Brien

82 Street Address (P.O. Box Number is Not Acceptable)

83

140 Satellite Avenue

84 City

Satellite Beach FL

85 Zip Code

32937

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

Dr. Joseph F. O'Brien

1-24-97

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD ☐ DELETENAME MONOHAN, BERNADETTE
STREET ADDRESS 416 RED SAIL WAY
CITY-ST-ZIP SATELLITE BEACH FL 32937TITLE VCD ☐ DELETENAME AITKEN, BRENDA
STREET ADDRESS 380 BERKLY ST
CITY-ST-ZIP SATELLITE BEACH FLTITLE S ☐ DELETENAME BRICKWEH, ALEXA
STREET ADDRESS 156 HEDGE GROVE AVE
CITY-ST-ZIP SATELLITE BEACH FL 32937TITLE T ☐ DELETENAME SNYDER, JAYNA
STREET ADDRESS 112 HEDGE GROVE AVE
CITY-ST-ZIP SATELLITE BEACH FL 32937TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD

Aitken, Brenda

380 Berkley Street

Satellite Beach, FL 32937

VCD

Lynn Saxenmeyer

204 NE 1st Court

Satellite Beach, FL 32937

S

Jue Anderson

540 Pelican Dr.

Satellite Bch, FL 32937

T

Valerie MacDowell

105 Hedgegrove Avenue

Satellite Beach, FL 32937

V.P.D.

Debbie Dooley

431 3RD Ave

Satellite Bch 71 32937

14. I do 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.

SIGNATURE:

Valerie MacDowell

2-8-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0018734

CR2E037 (9/96)