

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003945

FILED
Mar 04, 2009
Secretary of State

Entity Name: FRIENDS OF ATLANTIC BEACH ELEMENTARY SCHOOL, INC.

Current Principal Place of Business:

1015 ATLANTIC BLVD
SUITE 238
ATLANTIC BEACH, FL 32233

New Principal Place of Business:

Current Mailing Address:

1015 ATLANTIC BLVD
SUITE 238
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 59-3668674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELANCON, DEJEAN JR.
675 BEACH AVE.
ATLANTIC BEACH, FL 32233 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: JACKSON, JILL
Address: 1852 BEACH SIDE CT
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D () Delete
Name: MELANCON, DEJEAN JR
Address: 675 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: S () Delete
Name: RIDER, KATIE
Address: 1440 BEACH AVE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D (X) Delete
Name: MELANCON, LAURE
Address: 675 BEACH AVE
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MELANCON, LAURIE
Address: 675 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEJEAN MELANCON

D

03/04/2009

Electronic Signature of Signing Officer or Director

_____ Date