2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000003945

1. Entity Name

FRIENDS OF ATLANTIC BEACH ELEMENTARY SCHOOL, INC.



FILED Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90186 017 ****61.25

						GOD WE TH					
Principal Place of Business 875 BEACH AVE. ATLANTIC BEACH FL 32233				Mailing Address 675 BEACH AVE. ATLANTIC BEACH FL 32233				20028984			
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State				City & State				4. FEI Number 59-3668674			pplied For ot Applicable
Zip Country			Zi	p	Cou	intry		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	ed Agent	7. Name			7. Name and Addre	ame and Address of New Registered Agent					
- And the state of						Name - Secretary of the					
MELANCON, DEJEAN JR.						Street Add	tress (F	P.O. Box Number is No	ot Acceptable)		
675 BEACH AVE.				Gilder Address			., 000 (1	(i o i o o i o i o i o i o i o i o i o			
ATLANTIC BEACH FL 32233],
					City				FL Zip Coo	de	
3. 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. I am familiar with, and accept											
	ions of registered a				•						
SIGNATURE .		i name of registered agent		-F	- D!-t					ATE.	
,	Signature, typed or printer	name of registered agent	and title if ap	plicable. (NOT	:: negistere	d Agent signature	required	when reinstating)			
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution. 5. C]	\$5.00 May Be Added to Fees		neck Payable partment of	
10. OFFICERS AND DIRI				ECTORS 11.			Δ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PCEO .			☐ Delete		<u> </u>		100110110101111111111111111111111111111		☐ Change	Addition
NAME	MELANCON, DE	JEAN JR		Li Doloto	NAM					<u> </u>	
	675 BEACH AVE				STRE	ET ADDRESS					Į
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerman Melancux

4/8/03

904-241-2050