

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

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DOCUMENT # **N49232** (4)

1. Corporation Name

**CORAL SPRINGS HIGH SCHOOL COLTETTES PARENTS ASSO
CIATION, INC.**

Principal Place of Business

Mailing Address

7201 W SAMPLE ROAD
CORAL SPRINGS FL 33067

7201 W SAMPLE ROAD
CORAL SPRINGS FL 33067



3. Date Incorporated or Qualified
06/03/1992

3a. Date of Last Report
06/14/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

4. FEI Number
65-0397801

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

10. Name and Address of New Registered Agent

**KONIGSBERG, N SANDY
9900 W SAMPLE ROAD #400
CORAL SPRINGS FL 33065**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0602 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD**
STREET ADDRESS **YOUNT, MARY ANN**
CITY-ST-ZIP **2900 NW 87 TER**
CORAL SPRINGS FL 33065

11 TITLE **PRES** ☒ Change ☐ Addition
12 NAME **ZIVILE PANICO**
13 STREET ADDRESS **3732 WILDERNESS WAY**
14 CITY-ST-ZIP **CORAL SPRING, FL 33065**

TITLE ☐ DELETE
NAME **VD**
STREET ADDRESS **PANICO, ZIV**
CITY-ST-ZIP **3732 WILDERNESS WAY**
CORAL SPRINGS FL 33065

21 TITLE **V.P.** ☒ Change ☐ Addition
22 NAME **SHELLY FISHER**
23 STREET ADDRESS **5144 NW 33rd LANE**
24 CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☐ DELETE
NAME **SD**
STREET ADDRESS **MILEWSKI, BETH**
CITY-ST-ZIP **6612 BAYFRONT DR**
MARGATE FL 33063

31 TITLE **SEC** ☒ Change ☐ Addition
32 NAME **REGINA BECCHIO**
33 STREET ADDRESS **2155 NW 53rd AVE**
34 CITY-ST-ZIP **MARGATE, FL 33063**

TITLE ☐ DELETE
NAME **T**
STREET ADDRESS **WESTBROOKE, SHARON**
CITY-ST-ZIP **7046 NW 40TH CT**
CORAL SPRINGS FL 33065

41 TITLE **TRES** ☒ Change ☐ Addition
42 NAME **BARBARA FLANAGAN**
43 STREET ADDRESS **5024 NW 85th ROAD**
44 CITY-ST-ZIP **CORAL SPRINGS, FL 33067**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **BELL, LISA**
CITY-ST-ZIP **7201 W. SAMPLE ROAD**
CORAL SPGS. FL

51 TITLE **D** ☒ Change ☐ Addition
52 NAME **DR. CHARLOTTE SYPES**
53 STREET ADDRESS **7201 W SAMPLE RD**
54 CITY-ST-ZIP **CORAL SPRINGS, FL 33065**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 unchanged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

Date

954-755-9933

Daytime Phone #

CR2E037 (12/95)

N49232

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CORAL SPRINGS HIGH SCHOOL COLTETTES PARENTS ASSOCIATION

I D # 65-0397801

ANNUAL REPORT 1996 ADDITIONAL OFFICERS

CO-PRESIDENT:

CATHY KUHNS
8306 NW 36th ST
CORAL SPRINGS, FL 33065

CO-TREASURER:

CAROL FOX
3807 NW 69th TERR
CORAL SPRINGS, FL 33065