

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00CORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 27 PM 3:20

DOCUMENT # 706841 (4)

1. Corporation Name

FLORIDA CONGRESS OF PARENTS AND TEACHERS, INC.

Principal Place of Business

1747 ORLANDO CENTRAL PARKWAY
ORLANDO FL 32809-5757

Mailing Address

1747 ORLANDO CENTRAL PARKWAY
ORLANDO FL 32809-5757

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/19/1964

3a. Date of Last Report

01/31/1994

4. FEI Number

59-0637851

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status☒ \$68.75 Supplemental
Fee Not Required8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BAILEY, JANICE
1747 ORLANDO CENTRAL PARKWAY
ORLANDO FL 32809

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when constitutes)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TD	MESSER, CHRISTINE	2108 W. FLORA STREET	TAMPA FL
PD	LUZER, KAY	58 RAVENWOOD DRIVE	PORT ORANGE FL
SD	DEETA, DONNA	12303 DEL RIO DRIVE	JACKSONVILLE FL
DD	BAILEY, JANICE	1747 ORLANDO CENTRAL PKW	ORLANDO FL
XX	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXX
XX	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
TD	TOM BARNES	3500 N.W. 38th St.	Gainesville, FL 32606	☒	☐
PD	Anne Thompson	13700 SW 74th Ct.	Miami, FL 33158	☒	☐
SD	Deborah McIntyre	2232 Zane Grey Lane	Pensacola, FL 32534	☒	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	☐	☐
61 TITLE	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)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

2/14/95

407/855-7604