## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765563** 

Entity Name: OCEAN BREEZE ELEMENTARY SCHOOL PARENT TEACHERS

ORGANIZATION, INC.

FILED
Mar 12, 2013
Secretary of State
CC1605086191

## **Current Principal Place of Business:**

1101 CHEYENNE DR

INDIAN HARBOUR BCH, FL 32937

## **Current Mailing Address:**

1101 CHEYENNE DR

INDIAN HARBOUR BCH, FL 32937

FEI Number: 59-2311658 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

HERING, LAURIE 1101 CHEYENNE DR. INDIAN HARBOUR BCH, FL 32937 US

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

### Officer/Director Detail:

Title PD Title VP

Name GODDEN, DEBBIE Name QUINTERO, LOURDES
Address 1101 CHEYENNE DR. Address 1101 CHEYENNE DR.

City-State-Zip: INDIAN HARBOUR BCH FL 32937 City-State-Zip: INDIAN HARBOUR BCH FL 32937

Title SECR Title TREA

Name HAMILTON, BARBARA Name BOOMGAARDEN, SAMANTHA

Address 1101 CHEYENNE DR Address 1101 CHEYENNE DR

City-State-Zip: INDIAN HARBOUR BCH FL 32937 City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title CD Title CD

NameHERING, LAURIENameSCHROEDER, SUSANAddress1101 CHEYENNE DR.Address1101 CHEYENNE DR

City-State-Zip: INDIAN HARBOUR BCH FL 32937 City-State-Zip: INDIAN HARBOR FL 32937

I hereby 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 all other like empowered.

SIGNATURE: SAMANTHA BOOMGAARDEN

**TREASURER** 

03/12/2013