2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754538

FILED Apr 13, 2008 Secretary of State

Entity Name: SOUTHWEST DISTRICT PARENTS COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business: 3743 ABERDEEN DR 1500 N. TUTTLE AVE. SARASOTA, FL 34240 SARASOTA, FL 34237 US **Current Mailing Address: New Mailing Address:** 3743 ABERDEEN DR PO BOX 51204 SARASOTA, FL 34240 US SARASOTA, FL 34232 FEI Number: 59-2439861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BIXLER, ALICE 3743 ABERDEEN DR SARASOTA, FL 34240 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MCDONALD, LLOYD E GEARY, DARYL L Name: Name: 5712 29TH AVE DR. E. Address: 2751 FOUNTAIN CIRCLE Address: City-St-Zip: BRADENTON, FL 34208 City-St-Zip: SARASOTA, FL 34235 Title: () Delete Title: (X) Change () Addition MCDONALD, REBECCA L Name: YOW, BRENDA Name: Address: 5712 29TH AVE. DR. E. Address: 7101 JARVIS ROAD City-St-Zip: BRADENTON, FL 34208 City-St-Zip: SARASOTA, FL 34241 Title: () Delete Title: (X) Change () Addition MCMILLEN, CARROL MCMILLEN, CARROL Name: Name: 5507 18TH AVE E Address: Address: 5507 18TH AVE E City-St-Zip: BRADENTON, FL 34208 City-St-Zip: BRADENTON, FL 34208 Title: BK () Delete Title: () Change () Addition Name: ATYEO, DEBORAH Name: Address: 2043 N EUCLID AVE Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: () Delete Title: () Change (X) Addition THULL, STEVEN Name: Name: 3703 DOVER DRIVE Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34235 Title: () Delete Title: () Change (X) Addition MORIN. COLETTE Name: Name: Address: Address: 2221 CARPENTER NORTH PORT, FL 34286 City-St-Zip: 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: DARYL L. GEARY P 04/13/2008