

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90031 014 ****61.25

DOCUMENT # 758728

1. Entity Name

FUGUITT ELEMENTARY SCHOOL PTA, INC.

Principal Place of Business

**13010 101ST ST NO
 LARGO FL 33773**

Mailing Address

**13010 101ST ST NO
 LARGO FL 33773**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7628152

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GULER, PAM
 13010ST STREET N
 LARGO FL 33773**

7. Name and Address of New Registered Agent

Name **Nagel, Denise**
 Street Address (P.O. Box Number is Not Acceptable)
12124 Julian Ave.
 City **Largo** FL Zip Code **33778**

8. 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

Denise Nagel **Denise Nagel**

02-01-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	POWER, JIM	
STREET ADDRESS	833 13TH CT. SW.	
CITY-ST-ZIP	LARGO FL 33770	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	KWIATEK, CHERYL	
STREET ADDRESS	12025 106TH AVE., N	
CITY-ST-ZIP	LARGO FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	CROY, DEBBIE L	
STREET ADDRESS	11762 110TH TERRACE N	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	SALMON, SONYA	
STREET ADDRESS	7501 ULMERTON RD-APT 126	
CITY-ST-ZIP	LARGO FL 33771	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GULER, PAM	
STREET ADDRESS	12057 105 AVE. N	
CITY-ST-ZIP	LARGO FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LOMONACO, ELIZABETH	
STREET ADDRESS	10933 117TH STREET NORTH	
CITY-ST-ZIP	LARGO FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Nagel, Denise	
STREET ADDRESS	12124 Julian Ave	
CITY-ST-ZIP	Largo, FL 33778	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DeSantis, Kathy	
STREET ADDRESS	11814 100TH AVE. N.	
CITY-ST-ZIP	Seminole, FL 33778	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stein, Jerilyn	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STubbs, Bob	
STREET ADDRESS	12251 103RD AVE. N.	
CITY-ST-ZIP	Largo, FL 33778	
TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robbins, Tri	
STREET ADDRESS		
CITY-ST-ZIP		

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:

Kathy DeSantis **Kathy DeSantis**

1/16/02

727-397-0701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)