## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Aug 12, 2005 8:00 am Secretary of State **DOCUMENT # 758728** 1. Entity Name 08-12-2005 90001 011 \*\*\*\*61.25 FUGUITT ELEMENTARY SCHOOL PTA, INC. Principal Place of Business Mailing Address 13010 101ST ST NO LARGO FL 33773 13010 101ST ST NO LARGO FL 33773 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (5/05) City & State City & State 4. FEI Number Applied For 23-7628152 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u> Arsterovic</u> NAGEL, DENISE Street Address (P.O. Box Number is Not Acceptable) 12124 JULIAN AVE **LARGO FL 33778** City Zip Code <u>Semimole</u> 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE I FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By September 7, 2005 Trust Fund Contribution Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. NAGEL, DENISE TITLE ☐ Delete Change ■ Addition 12124 JULIAN AVE Lori Silverstein. D NAME 18480 104TH AVE N STREET ADDRESS **LARGO FL 33778** STREET ADDRESS CITY-ST-ZIP Seminole Fl 33778 CITY-ST-ZIP SERENA, PAPA TITLE Delete Change ☐ Addition 10550 HAZEL ST. NORTH NAME MaryJoan Hensley. D 18371 103rd Ave NAME STREET ADDRESS **LARGO FL 33778** STREET ADDRESS Largo Fl 33778 CHTY-ST-ZIP CITY-ST-ZIP VΡ TITLE HENSLEY, MARY JEAN ☐ Defete TITLE Change ☐ Addition NAME 12271 103RD AVE NAME Deniae Nagel D STREET ADDRESS **LARGO FL 33778** STREET ADDRESS 12124 Julian Ave CITY-ST-ZIP CITY-ST-ZIP SEC argo Fl 33778 SILVERSTEIN, LORI SECRETA ☐ Delete Change Addition 12420 104TH AVE NAME NAME STREET ADDRESS **LARGO FL 33778** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS 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: SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

<u>8.9-0.</u>

707-393-1664

FILED