

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008481

FILED  
May 05, 2005  
Secretary of State

**Entity Name:** DIPLOMAT MIDDLE SCHOOL P.T.S.O. INC.

**Current Principal Place of Business:**

1039 NE 16TH TERRACE  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

**Current Mailing Address:**

1039 NE 16TH TERRACE  
CAPE CORAL, FL 33909

**New Mailing Address:**

**FEI Number:** 65-1071412      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KUSHNER, STEVEN P  
1375 JACKSON ST., SUITE 202  
FT. MYERS, FL 33901      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:**

Title: PD      (X) Delete  
Name: TROMBLEY, CINDY  
Address: 2944 NW 5TH PLACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: TD      ( ) Delete  
Name: MARZELLA, DEBORAH A  
Address: 1841 NW 14TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33993

Title: VD      ( ) Delete  
Name: FERNANDEZ, DENISE  
Address: 225 NE 7TH PLACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: VD      (X) Delete  
Name: WENZLAFF, DONNA  
Address: 1824 SE 12TH STREET  
City-St-Zip: CAPE CORAL, FL 33990

Title: SD      ( ) Delete  
Name: HICKS, DEE  
Address: 1039 NE 16TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33909

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DENISE FERNANDEZ

VD

05/05/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date