

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000008481

FILED  
Apr 25, 2003  
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 ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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 ( ) Delete  
Name: KLINGENSMITH, JODIE  
Address: 1838 WHITECAP CIRCLE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TD ( ) Delete  
Name: CARR, DEBRA L  
Address: 1311 SE 21ST TERRACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: VD ( ) Delete  
Name: EADS, KIM  
Address: 110 N.E. 19TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33909

Title: SD ( ) Delete  
Name: CAPLE, SUSAN  
Address: 4138 SAUMS DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: SD ( ) Change (X) Addition  
Name: WILLIAMS, NICOLE  
Address: 1366 SUNRISE DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: DEBRA L. CARR

TD

04/25/2003

Electronic Signature of Signing Officer or Director

Date