2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000002787

TI FILED
Sep 11, 2012
Secretary of State

Entity Name: TROPICAL PARENT TEACHER ORGANIZATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

885 S COURTNEY PKWY MERRITT ISLAND, FL 32952

Current Mailing Address: New Mailing Address:

885 S COURTNEY PKWY MERRITT ISLAND, FL 32952

FEI Number: 41-2046773 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LEGGE, DEBBIE 885 S COURTNEY PKWY MERRITT ISLAND, FL 32952 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: CO-P

Name: CHAGNON, JEAN M

Address: 3020 SOUTHERN OAKS DRIVE City-St-Zip: MERRITT ISLAND, FL 32952

Title: 7

 Name:
 KAPPER, TONI

 Address:
 430 RIO VISTA LANE

 City-St-Zip:
 MERRITT ISLAND, FL 32952

Title: TE

 Name:
 HUFF, BEVERLY

 Address:
 617 MILWHEEL DR

 City-St-Zip:
 MERRITT ISL, FL 32952

Title: SEC

Name: KALANTZIS, CHRISTA
Address: 3960 WILD PINE LANE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: CO-P

 Name:
 CAMACHO, LISSETTE

 Address:
 2030 PINEAPPLE PLACE

 City-St-Zip:
 MERRITT ISLAND, FL 32952

Title: VP

Name: GLASS, LISA Address: 177 MARLIN DR

City-St-Zip: MERRITT ISLAND, FL 32952

I hereby 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 all other like empowered.

SIGNATURE: JEAN M. CHAGNON CO-P 09/11/2012