2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007895

Apr 25, 2006 Secretary of State

Entity Name: FORT MYERS BEACH ELEMENTARY PARENT TEACHER ORGANIZATION INC.

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

2751 OAK STREET

FORT MYERS BEACH, FL 33931

Current Mailing Address: New Mailing Address:

2751 OAK STREET

FORT MYERS BEACH, FL 33931

FEI Number: 16-1631117 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:

FREEMAN, NADINE

BARNES, EVIE 375 BAYLAND ROAD 159 BAY MAR DRIVE

FORT MYERS BEACH, FL 33931 US FORT MYERS BEACH, FL 33931 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: EVIE BARNES 04/25/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FREEMAN, NADINE BARNES, EVIE Name: Name:

375 BAYLAND RD Address: 159 BAY MAR DRIVE Address: City-St-Zip: FORT MYERS BCH, FL 33931 City-St-Zip: FORT MYERS BCH, FL 33931

Title: () Delete Title: (X) Change () Addition

EL RUBAIE, JANER Name: MALBON, REBECCA Name: Address: 11810 ISLE OF PALMS DRIVE Address: 17771 BROADWAY AVE City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: FORT MYERS BEACH, FL 33931

Title: () Delete Title: () Change () Addition

WEBER, GINGER Name: Name: Address: 1551 PINECREST ROAD Address:

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip:

(X) Change () Addition Title: () Delete Title:

Name: WHITEHEAD, DEBBIE Name: ELRUBAIE, JANET

11810 ISLE OF PALMS DRIVE Address: 20 EMILY LANE Address: City-St-Zip: FORT MYERS BCH, FL 33931 City-St-Zip: FORT MYERS BCH, FL 33931

Title: (X) Delete Title: () Change () Addition

LACORTE, DIANE Name: Name: 7390 ESTERO BOULEVARD #203 Address: Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: EVIE BARNES Ρ 04/25/2006