

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007895

FILED
Aug 14, 2007
Secretary of State

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

Current Principal Place of Business:

2751 OAK STREET
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

2751 OAK STREET
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 16-1631117 **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:

BARNES, EVIE
159 BAY MAR DRIVE
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, EVIE
Address: 159 BAY MAR DRIVE
City-St-Zip: FORT MYERS BCH, FL 33931

Title: VP () Delete
Name: MALBON, REBECCA
Address: 17771 BROADWAY AVE
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: T () Delete
Name: WEBER, GINGER
Address: 1551 PINECREST ROAD
City-St-Zip: FORT MYERS, FL 33919

Title: S () Delete
Name: ELRUBAIE, JANET
Address: 11810 ISLE OF PALMS DRIVE
City-St-Zip: FORT MYERS BCH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WEBER, GINGER
Address: 1551 PINECREST RD
City-St-Zip: FORT MYERS, FL 33919

Title: T (X) Change () Addition
Name: FAIRCLOTH, SHARON
Address: 11711 ISLE OF PALMS DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33908

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

I hereby certify that the information supplied with this filing does not qualify 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: SHARON FAIRCLOTH

T

08/14/2007

Electronic Signature of Signing Officer or Director

Date