

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90013 046 ****70.00

DOCUMENT # N03000001555					
1. Entity Name SCHOOL IN THE PARK PARENT TEACHER ORGANIZATION, INC.					
Principal Place of Business 1700 SEMINOLE DRIVE SARASOTA, FL 34239 US			Mailing Address 1700 SEMINOLE DRIVE SARASOTA, FL 34239 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-1182455	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent RICE, MELISSA K 1900 MAIN STREET SUITE 300 SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name: Katuska Zambano-Ramos Street Address (P.O. Box Number is Not Acceptable): 2328 Sunnyside Lane City: Sarasota FL Zip Code: 34239		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: Signature, typed or printed name of registered agent and title if applicable.			DATE: 7-7-2004 (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Barbara Parker 890 Faulkwood Ct Sarasota, FL 34232		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Barbara Parker 890 Faulkwood Ct Sarasota, FL 34232	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Tamara Williams 1505 Mallard Ln Sarasota, FL 34239		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Tamara Williams 1505 Mallard Ln Sarasota, FL 34239	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Katuska Zambano-Ramos 2328 Sunnyside Ln Sarasota, FL 34239		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Katuska Zambano-Ramos 2328 Sunnyside Ln Sarasota, FL 34239	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Ann Windom 3017 Pony Ln Sarasota, FL 34232		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Ann Windom 3017 Pony Ln Sarasota, FL 34232	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			Date: 7/7/2004 Daytime Phone #: 941 365 8242		