

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006086

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** NORTH PORT HIGH SCHOOL FOUNDATION, INC.

**Current Principal Place of Business:**

6400 WEST PRICE BLVD.  
NORTH PORT, FL 34291

**New Principal Place of Business:**

**Current Mailing Address:**

6400 WEST PRICE BLVD.  
NORTH PORT, FL 34291

**New Mailing Address:**

**FEI Number:** 42-1625128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REDENBO, JANICE  
6400 WEST PRICE BLVD.  
NORTH PORT, FL 34287 US

**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:** D  
**Name:** KENNEY, GEORGE  
**Address:** 6400 WEST PRICE BLVD.  
**City-St-Zip:** NORTH PORT, FL 34291

**Title:** D  
**Name:** REDENBO, JANICE  
**Address:** 6728 DENNISON AVE.  
**City-St-Zip:** NORTH PORT, FL 34291

**Title:** AP  
**Name:** PAQUETTE, PAUL  
**Address:** 6400 W PRICE BLVD  
**City-St-Zip:** NORTH PORT, FL 34291

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:** DR. GEORGE KENNEY

D

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date