

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010438

FILED
Apr 28, 2009
Secretary of State

Entity Name: G-STAR PARENT TEACHER STUDENT ORGANIZATION, INC.

Current Principal Place of Business:

2065 PRAIRIE ROAD
BUILDING J
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

2065 PRAIRIE ROAD
BUILDING J
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 73-1687205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUPTNER, GREGORY E
2065 PRAIRIE ROAD
BUILDING J
WEST PALM BEACH, FL 33406 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: CO-P () Delete
Name: MATHERS, LAUREN
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: CO-P () Delete
Name: LEBRUN, BARBARA
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: COTR () Delete
Name: MATHERS, ALBERT
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: COTR () Delete
Name: RINGERSEN, SCOTT
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: SEC () Delete
Name: DRITTO, ANNEMARIE
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: COVP () Delete
Name: ROBINSON/SHANNON, ODETTE
Address: 2065 PRAIRIE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CO-P (X) Change () Addition
Name: TRIPP, RICHARD
Address: 2065 PRAIRIE ROAD, BUILDING J
City-St-Zip: WEST PALM BEACH, FL 33406 US

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

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

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City-St-Zip:

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

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: SCOTT RINGERSEN

COTR

04/28/2009

Electronic Signature of Signing Officer or Director

Date