

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003739

FILED
Jun 13, 2006
Secretary of State

Entity Name: SAIL HIGH SCHOOL PTSO, INC.

Current Principal Place of Business:

SAIL HIGH SCHOOL
725 N. MACOMB STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

SAIL HIGH SCHOOL
725 N. MACOMB STREET
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 56-2366772 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:

ANGEL, SUSAN
4038 ARDA DR.
TALLAHASSEE, FL 32309 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: MOON, MARY
Address: 538 E. COLLEGE AVE.
City-St-Zip: TALLAHASSEE, FL 32301

Title: P () Delete
Name: ANGEL, SUSAN
Address: 4038 ARDA DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: STAMPELOS, BILLYE
Address: 3862 MORIARITY
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: HARTSFIELD, ANNE M
Address: 2961 N. SETTLERS BLVD.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
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 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: ANNE HARTSFIELD

T

06/13/2006

Electronic Signature of Signing Officer or Director

Date