2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003739

Entity Name: SAIL HIGH SCHOOL PTSO, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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SAIL HIGH SCHOOL 725 N. MACOMB STREET TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

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

FEI Number: 56-2366772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ANGEL, SUSAN
4038 ARDA DR.
TALLAHASSEE, FL 32309 US
HARTSFIELD, ANNE
725 N. MACOMB ST.
TALLAHASSEE, FL 32303 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: ANNE M. HARTSFIELD 04/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MOON, MARY Name: MCDERMOTT, DAWN M Address: 538 E. COLLEGE AVE. Address: 725 N. MACOMB ST.

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32303

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ANGEL, SUSAN
 Name:
 CHURCHILL, MARY

 Address:
 4038 ARDA DR.
 Address:
 725 N. MACOMB ST.

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: S () Delete Title: S (X) Change () Addition

 Name:
 STAMPELOS, BILLYE
 Name:
 PHILLIPS, TAYLOR

 Address:
 3862 MORIARITY
 Address:
 725 N. MACOMB ST.

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:
 TALLAHASSEE, FL 32303

Title: T () Delete Title: () Change () Addition

 Name:
 HARTSFIELD, ANNE M
 Name:

 Address:
 2961 N. SETTLERS BLVD.
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 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: ANNE M. HARTSFIELD T 04/30/2007