2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2006
Secretary of State

DOCUMENT# N04000004568

Entity Name: SEALEY ELEMENTARY SCHOOL PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

2815 ALLEN RD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

2815 ALLEN RD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 26-0088903 **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:

INSERRA, TOM
2815 ALLEN RD
TALLAHASSEE, FL 32312 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: DP ( ) Delete
Name: JENSEN, YSONNE
Address: 744 DERBYSHIRE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DPP ( ) Delete
Name: WHITE, PAMELA
Address: DEPT. OF FINANCIAL SRVES 200 E GAINES ST
City-St-Zip: TALLAHASSEE, FL 323990321

Title: DVP ( ) Delete
Name: WILLIS, SANDY
Address: 3125 ORTEGA DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT ( ) Delete
Name: TOUGAS, DEBRA
Address: FBMC 3100 SESSIONS RD
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: DEBRA TOUGAS DT 05/10/2006
Electronic Signature of Signing Officer or Director — Date