2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N04000004594

Entity Name: SATURDAY SCIENCE PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

3600 COLLEGE AVENUE
C/O ACADEMY PTO
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

3600 COLLEGE AVENUE
C/O ACADEMY PTO
DAVIE, FL 33314

New Mailing Address:

FEI Number: 77-0632076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WAY, JENEAN
3340 N.E. 17TH COURT
FORT LAUDERDALE, FL 33311 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:	P	( ) Delete
Name:	WAY, JENEAN	
Address:	3340 N.W. 17TH COURT	
City-St-Zip:	FT. LAUDERDALE, FL 33311	
Title:	V	( ) Delete
Name:	FELICIANO, LESLIE	
Address:	140 S.W. 70TH WAY	
City-St-Zip:	MARGATE, FL 33068	
Title:	T	( ) Delete
Name:	RICKS, SANDRA	
Address:	2880 N.W. 18TH COURT	
City-St-Zip:	FT. LAUDERDALE, FL 33311	
Title:	S	( ) Delete
Name:	HANSEN, PAULINE	
Address:	5240 NW 14TH PLACE	
City-St-Zip:	LAUDERHILL, FL 33313	
Title:	H	(X) Delete
Name:	BRITT, LINDA	
Address:	7809 VENETIAN ST.	
City-St-Zip:	MIRAMAR, FL 33023	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	V	(X) Change ( ) Addition
Name:	HANSEN, PAULINE	
Address:	5240 NW 14TH PLACE	
City-St-Zip:	LAUDERHILL, FL 33313	
Title:	T	(X) Change ( ) Addition
Name:	BRITT, LINDA	
Address:	7809 VENETIAN ST.	
City-St-Zip:	MIRAMAR, FL 33023	
Title:	S	(X) Change ( ) Addition
Name:	RICKS, SANDRA	
Address:	2880 NW 18TH COURT	
City-St-Zip:	FORT LAUDERDALE, FL 33311	
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: JENEAN WAY P 04/29/2008

Electronic Signature of Signing Officer or Director — Date