

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005692

FILED
Jan 20, 2006
Secretary of State

Entity Name: ARTHUR J. GALLAGHER NEIGHBORHOOD SCHOOL PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

3300 SCHOOL HOUSE ROAD
HARMONY, FL 34773

New Principal Place of Business:

Current Mailing Address:

3300 SCHOOL HOUSE ROAD
HARMONY, FL 34773

New Mailing Address:

FEI Number: 20-1288930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGC CO
200 SOUTH ORANGE AVENUE
SUNTRUST CENTER SUITE 200
ORLANDO, FL 32801 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: VP () Delete
Name: GARRET, CAMI
Address: 3300 SCHOOL HOUSE ROAD
City-St-Zip: HARMONY, FL 34773

Title: S () Delete
Name: MASSEY, AIMEE
Address: 3300 SCHOOL HOUSE ROAD
City-St-Zip: HARMONY, FL 34773

Title: T () Delete
Name: POZZI, GABRIELA
Address: 3300 SCHOOL HOUSE ROAD
City-St-Zip: HARMONY, FL 34773

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:

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: GABRIELA POZZI

T

01/20/2006

Electronic Signature of Signing Officer or Director

Date