

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005896

Entity Name: SCHOLASTIC CHESS INC.

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

3325 OAKLAND RD N
LAKELAND, FL 33801

New Principal Place of Business:

1307 PLEASANT PLACE
LAKELAND, FL 33801

Current Mailing Address:

3325 OAKLAND RD N
LAKELAND, FL 33801

New Mailing Address:

1307 PLEASANT PLACE
LAKELAND, FL 33801

FEI Number: 20-1240471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARROTTE, THOMAS C
3325 OAKLAND RD N
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

PARROTTE, THOMAS C
1307 PLEASANT PLACE
LAKELAND, FL 33801 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:

02/12/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS C. PARROTTE,
Address: 3325 OAKLAND RD N
City-St-Zip: LAKELAND, FL 33801 US

Title: VP () Delete
Name: WALTER J. CAPIK,
Address: 2724 FRENCH AVE
City-St-Zip: LAKELAND, FL 33801 US

Title: T () Delete
Name: MAUREEN V. PARROTTE,
Address: 3325 OAKLAND RD N
City-St-Zip: LAKELAND, FL 33801 US

Title: S () Delete
Name: THOMAS A. PARROTTE,
Address: 3325 OAKLAND RD N
City-St-Zip: LAKELAND, FL 33801 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMAS C. PARROTTE,
Address: 1307 PLEASANT PLACE
City-St-Zip: LAKELAND, FL 33801 US

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

Title: T (X) Change () Addition
Name: MAUREEN V. PARROTTE,
Address: 1307 PLEASANT PLACE
City-St-Zip: LAKELAND, FL 33801 US

Title: S (X) Change () Addition
Name: THOMAS A. PARROTTE,
Address: 1307 PLEASANT PLACE
City-St-Zip: LAKELAND, FL 33801 US

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: THOMAS C PARROTTE

P

02/12/2007

Electronic Signature of Signing Officer or Director

Date