

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 17, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N05857**

1. Entity Name  
**PINELLAS SCHOLA CANTUALIS, INC.**



Principal Place of Business  
**507 S. PROSPECT AVE.  
CLEARWATER, FL 33756**

Mailing Address  
**507 S. PROSPECT AVE.  
CLEARWATER, FL 33756**



01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**59-2466396**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**HALISKY, JAN  
507 S PROSPECT AVE  
CLEARWATER, FL 33756**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000787776  
01/18/08-80014-004 61.25

**10. OFFICERS AND DIRECTORS**

TITLE	DP
NAME	HALISKY, JAN
STREET ADDRESS	507 S PROSPECT AVE
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	DV
NAME	TALSNESS, STEVEN L
STREET ADDRESS	507 S PROSPECT AVE
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	DST
NAME	HALISKY, MARY JO
STREET ADDRESS	305 ORANGEWOOD AVENUE
CITY-ST-ZIP	CLEARWATER, FL 33755
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*Jan D. Halisky, President*  
**JAN D HALISKY**

*January 15, 2008*