

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010245

FILED
Apr 30, 2009
Secretary of State

Entity Name: CHAMBERLAIN HIGH SCHOOL CAPS PARENT ORGANIZATION, INC.

Current Principal Place of Business:

9401 NORTH BOULEVARD
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

9401 NORTH BOULEVARD
TAMPA, FL 33612

New Mailing Address:

FEI Number: 20-5639077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBOER, BRENDA
9401 NORTH BOULEVARD
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

STORTS, MARYBETH
9401 NORTH BOULEVARD
TAMPA, FL 33612 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: MARYBETH STORTS

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEBOER, BRENDA
Address: 3328 CHEVIOT DRIVE
City-St-Zip: TAMPA, FL 33618

Title: VP () Delete
Name: STROBRIDGE, LORRAINE
Address: 13708 WILKES DRIVE
City-St-Zip: TAMPA, FL 33618

Title: VP () Delete
Name: AKE, HEIDI
Address: 10501 ORANGE GROVE COURT
City-St-Zip: TAMPA, FL 33618

Title: T () Delete
Name: PULLARO, SUZETTE
Address: 1612 MAGDALENE MANOR DRIVE
City-St-Zip: TAMPA, FL 33613

Title: S () Delete
Name: STARK, VALERIE
Address: 1908 W. MEADOWBROOK AVE.
City-St-Zip: TAMPA, F: 33612

Title: S () Delete
Name: FREEMAN, KORI
Address: 13318 GOLF CREST CIRCLE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STORTS, MARYBETH
Address: 11816 NICKLAUS CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change () Addition
Name: HOLT, JONI
Address: 4406 OLD ORCHARD DRIVE
City-St-Zip: TAMPA, FL 33618

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

Title: T (X) Change () Addition
Name: ROBLES, SHERRI
Address: 2107 CHESTNUT FOREST DRIVE
City-St-Zip: TAMPA, FL 33618

Title: S (X) Change () Addition
Name: CALDWELL, ERYN
Address: 13551 LAKE MAGDALENE DRIVE
City-St-Zip: TAMPA, FL 33613

Title: S (X) Change () Addition
Name: MACINNES, ALISA
Address: 11705 PHOENIX CIRCLE
City-St-Zip: TAMPA, FL 33618

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: SHERRI ROBLES

T

04/30/2009

Electronic Signature of Signing Officer or Director

Date