

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22733

FILED
Sep 05, 2005
Secretary of State

Entity Name: GIFTED ASSOCIATION OF PINELLAS, INC.

Current Principal Place of Business:

8800 49TH ST N.
STE. 401
PINELLAS PARK, FL 33782 US

New Principal Place of Business:

Current Mailing Address:

8800 40TH ST N
STE. 401
PINELLAS PARK, FL 33782 US

New Mailing Address:

FEI Number: 59-2886773 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WINNER, JACKIE
8142 NORWOOD RD
LARGO, FL 33777 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: PD () Delete
Name: KOON, CHERYL
Address: 1206 WESTLEY STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VD () Delete
Name: OLNEY, JANA
Address: 800 DEL ORO DR.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: TD () Delete
Name: WINNER, JACKIE
Address: 8142 NORWOOD ROAD
City-St-Zip: LARGO, FL 33777

Title: SD () Delete
Name: CARTA, JOY
Address: 1205 WILLOWICK CIR.
City-St-Zip: SAFETY HARBOR, FL 34695

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:

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 Section 119.07(3)(i), 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: JACKIE WINNER

TD

09/05/2005

Electronic Signature of Signing Officer or Director

Date