

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46396

1. Entity Name

SEA BREEZE ELEMENTARY SCHOOL PARENT-TEACHER ORGA

Principal Place of Business

3601 71ST STREET WEST
BRADENTON FL 34209

Mailing Address

3601 71ST STREET WEST
BRADENTON FL 34209

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0288617

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SICARD, MICHAEL
3601 71ST STREET WEST
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name Bill Stenger

Street Address (P.O. Box Number is Not Acceptable)

3601 71st Street West

City Bradenton

FL

Zip Code 34209

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.

SIGNATURE

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

Principal

(NOTE: Registered Agent signature required when reinstating)

1/11/01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HERKERT, DEBRA
STREET ADDRESS 6709 34TH AVE W
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE VD
NAME COSTELLO, DENISE
STREET ADDRESS 6406 35TH AVE W
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE SD
NAME HOCKER, PATTY
STREET ADDRESS 6802 ARBOR OAKS CIR
CITY-ST-ZIP BRADENTON FL 34209 ☐ Delete

TITLE TD
NAME DONAHUE, RUTHANN
STREET ADDRESS 3506 68TH ST W
CITY-ST-ZIP BRADENTON FL 34209 ☒ Delete

TITLE VD
NAME CICORIA, SUSAN
STREET ADDRESS 6914 34TH AVE N
CITY-ST-ZIP BRADENTON FL 34209 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Change ☒ Addition
NAME Karen Fraley
STREET ADDRESS 1815 Palma Sola Blvd.
CITY-ST-ZIP Bradenton, FL 34209

TITLE SD ☐ Change ☒ Addition
NAME Jennifer Haughey
STREET ADDRESS 4015 63rd St. W.
CITY-ST-ZIP Bradenton, FL 34209

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Patricia D. Hocker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-01

Date

941-792-4291

Daytime Phone #

CR2E037 (10/00)