2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47667

FILED Jan 09, 2010 Secretary of State

Entity Name: SEA GATE ELEMENTARY SCHOOL PARENT-TEACHER ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

650 SEAGATE DRIVE 650 SEAGATE DRIVE

ATTENTION: TREASURER ATTENTION: PTO TREASURER NAPLES, FL 34103 US NAPLES, FL 34103 US

Current Mailing Address: New Mailing Address:

650 SEAGATE DRIVE 650 SEAGATE DRIVE

ATTENTION: TREASURER

NAPLES, FL 34103 US

ATTENTION: PTO TREASURER

NAPLES, FL 34103 US

NAPLES, FL 34103 US

FEI Number: 59-2371707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTELLANI, BRIAN MR.
SEA GATE ELEMENTARY SCHOOL
SEA GATE DRIVE
SEA GATE DRIVE
SEA GATE DRIVE

650 SEA GATE DRIVE 650 SEA GATE DRIVE NAPLES, FL 34103 US NAPLES, FL 34103 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: JOHN MOLL 01/09/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PPD

Name: COLLINS, GAIL MRS.

Address: 6642 NATURE PRESERVE COURT

City-St-Zip: NAPLES, FL 34109

Title: V

Name: VITALE, LENORE MRS.

Address: 7090 SUGAR MAGNOLIA COURT

City-St-Zip: NAPLES, FL 34109

Title: D

Name: DIPASQUALE, LISETTE MRS. Address: 7119 SUGAR MAGNOLIA COURT

City-St-Zip: NAPLES, FL 34109

Title: \

Name: TREBILCOCK, LISA MRS. Address: 6660 MANGROVE WAY City-St-Zip: NAPLES, FL 34109

Title: TD

 Name:
 MOLL, JOHN M MR.

 Address:
 60 SEAGATE DR UNIT 1603

 City-St-Zip:
 NAPLES, FL 34103

Title: PRES

Name: LIPPERT, MICHELLE MRS. Address: 516 PORTSIDE DRIVE City-St-Zip: NAPLES, FL 34103

I hereby 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 all other like empowered.

SIGNATURE: JOHN MICHAEL MOLL TD 01/09/2010