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Jul 01 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N49232 (4)

1. Corporation Name

CORAL SPRINGS HIGH SCHOOL COLTETTES PARENTS ASSO  
CIATION, INC.

Principal Place of Business

Mailing Address

7201 W SAMPLE ROAD  
CORAL SPRINGS FL 33067

7201 W SAMPLE ROAD  
CORAL SPRINGS FL 33065-2249



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KONIGSBERG, N SANDY  
9900 W SAMPLE ROAD #400  
CORAL SPRINGS FL 33065

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE

NAME ZVILE, PANICO  
STREET ADDRESS 3732 WILDERNESS WAY  
CITY-ST-ZIP CORAL SPRING FL 33065

TITLE ☐ DELETE

NAME FISHER, SHELLY  
STREET ADDRESS 5144 NW 33RD LANE  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ DELETE

NAME BECCHIO, REGINA  
STREET ADDRESS 2155 NW 63RD AVE  
CITY-ST-ZIP MARGATE FL 33063

TITLE ☐ DELETE

NAME FLANAGAN, BARBARA  
STREET ADDRESS 5024 NW 85TH ROAD  
CITY-ST-ZIP CORAL SPRINGS FL 33067

TITLE ☐ DELETE

NAME SPYES, CHARLOTTE DR.  
STREET ADDRESS 7201 W SAMPLE RD  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☒ DELETE

NAME FOX, CAROL  
STREET ADDRESS 3807 NW 69TH TERR  
CITY-ST-ZIP CORAL SPRINGS FL 33065

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME JAYE SAULTZ  
1.3 STREET ADDRESS 4933 NW 82  
1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE DIRECTOR ☒ Change ☐ Addition

5.2 NAME LISA BELL  
5.3 STREET ADDRESS 7201 W. SAMPLE RD.  
5.4 CITY-ST-ZIP CORAL SPRINGS, FL 33067

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

\$61.25 BANK

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)