## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400000732

Entity Name: THE SEASIDE SCHOOL, INC.

Jan 21, 2005 Secretary of State

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

10 SMOLIAN CIRCLE

SANTA ROSA BEACH, FL 32459

**Current Mailing Address: New Mailing Address:** 

P. O. BOX 4610

SANTA ROSA BEACH, FL 32459

FEI Number: 59-3282809 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:

BUZZETT, WILLIAM A 216 FOREST STREET

SEAGROVE BEACH, FL 32459 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:** 

() Delete BUZZETT, BILLY Name:

216 FOREST STREET Address: City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ( ) Delete BREAUX, MELISSA Name:

Address: 159 GRAYTON TRAILS ROAD City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: PD() Delete GILBERT, RUSS Name: Address: P.O. BOX 4603 City-St-Zip: SEASIDE, FL 32439

Title: ( ) Delete WILLIAMS, ROSEMARY Name:

Address: PO BOX 4653

SANTA ROSA BEACH, FL 32459 City-St-Zip:

Title: () Delete WATSON, POLLY Name:

45 FLAMINGO DR. Address: City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Delete CHRISTE, JAMIE Name:

Address: 35 CLAYTON LANE SANTA ROSA BEACH, FL 32459 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

DILLON, MIRIAM Name: Address: 102 CHRYSLER AVE.

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: (X) Change ( ) Addition

Name: MULLINS, HAL

Address: 61 EAST BERMUDA DRIVE City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: (X) Change ( ) Addition POTTER, CATHY KEENE Name: 249 N. BLUE HERON DRIVE Address: City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: TD (X) Change ( ) Addition

Name: NORRIS, NANCY

139 EMERALD RIDGE Address:

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: (X) Change ( ) Addition

GILBERT, RUSS Name: PO BOX 4603 Address:

City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: (X) Change ( ) Addition BRYANT, CARL Name:

Address: 115 FOX LAKE DRIVE

SANTA ROSA BEACH, FL 32459 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: MIRIAM W. DILLON PD 01/21/2005