2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 8:00 am
Secretary of State
03-29-2007 90021 001 ***150.00

400334-

DOCUMENT # N98000002117

1. Entity Name
NEW MIDDLE SCHOOL, INC.

Principal Place of Business	Mailing Address
2355 NEBRASKA AVE PALM HARBOR, FL 34683	2355 NEBRASKA AVE PALM HARBOR, FL 34683

03012007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3521601 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TORRENCE, ALFRED W JR 6645 RIDGE ROAD PORT RICHEY, FL 34668	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. I am familiar with, and accept the obligation[illegible]

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TSCHANTZ, RICK 15902 LAHINCH CIR ODESSA, FL 33556	☒ Delete	SD Nost, Martin 1431 Ridge Top Way Clearwater, FL 33765	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C/D GHOVAHEE, HOUSH 304 SOUTH BELCHER RD. CLEARWATER, FL 33765	☐ Delete	D Pesce, Denise 110 Harbor Dr. Palm Harbor FL 34683	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PANETTA, MICHAEL 2717 SEVILLE BLVD CLEARWATER, FL 33764	☐ Delete	D Varkas, Catherine 1710 Grand Central Dr. Tarpon Springs, FL 34689	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SHEPPARD, PATRICK J 854 HARBOR ISLAND CLEARWATER BEACH, FL 33767	☐ Delete	D Kirsch, Leonard 1516 Bayshore Blvd. Dunedin, FL 34698	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NAUERT, JODELL 2925 KEYSTONE RD. TARPON SPRINGS, FL 34689	☐ Delete	D Latvala, Susan 109 Phillips Way Palm Harbor, FL 34683	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VARKAS, CHRISTINE 860 S. FLORIDA AVE TARPON SPRINGS, FL 34689	☐ Delete		☐ Change

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Christine Varkas 3/19/07 727-781-8980
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

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DOCUMENT # N98000002117

1. Entity Name
NEW MIDDLE SCHOOL, INC.

400444400

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Please Sign Here

SIGNATURE _____ 3/12/07

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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SIGNATURE: Christine Varkas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #