

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 91067 025 ****61.25

DOCUMENT # N98000002117

1. Entity Name

NEW MIDDLE SCHOOL, INC.



Principal Place of Business

**2313 NEBRASKA AVENUE
PALM HARBOR FL 34683**

Mailing Address

**2313 NEBRASKA AVENUE
PALM HARBOR FL 34683**

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 **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 obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
LATVALA, JACK S
109 PHILLIPS WAY
INDIAN BLUFFS ISLAND FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
Housh Ghovace
304 South Belcher Rd
Clearwater, FL. 33765.** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
MAY, VICKI
932 ROYAL BIRKDALE DRIVE
PALM HARBOR FL 34683** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
Jodell Navert
2025 Keystone Rd
Tarpon Spgs, FL. 34689** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
PANETTA, MICHAEL
2717 SEVILLE BLVD
CLEARWATER FL 33764** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
Leonard Kirsch
1516 Bayshore Blvd
Dunedin, FL. 34698** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
SHEPPARD, PATRICK J
4180 14TH STREET N.E.
SAINT PETERSBURG FL 33703** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T/D
Maureen Saunders
470 Dixie Hwy
Tarpon Spgs, FL. 34689** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
KOULIANOS, JOHN M
1020 PENINSULA AVENUE
TARPON SPRINGS FL 34689** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
VARKAS, CHRISTINE
1570 E. LAKE WOODLANDS PKWY
OLDSMAR FL 34677** ☐ Delete

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

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: *Christine Varkas* **REQUIRED**

3/7/03

CR2E037 (10/02)