# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 26, 2007 8:00 am**
**Secretary of State**
02-26-2007 90067 023 ****61.25

DOCUMENT # 732899

1. Entity Name
MASCOTTE ELEMENTARY PARENT-TEACHER ORGANIZATION,INC.

40024304

| Principal Place of Business | Mailing Address |
|---|---|
| 513 ALBROOK STREET<br>MASCOTTE, FL 34753 | 513 ALBROOK STREET<br>MASCOTTE, FL 34753 |

01152007 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 03-0000922 ☐ Applied For ☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

KRUSE, JOHN
16901 TUSCANOOGA ROAD
GROVELAND, FL 34736

**7. Name and Address of New Registered Agent**

Name: Beverly Massey
Street Address (P.O. Box Number is Not Acceptable): 2603 Stephens Road
City: Groveland, FL 34736 — 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: Beverly Massey — DATE: 2/22/07
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 | VPD<br>DEBO-RAMIREZ, DEANNA<br>17845 TUSCANOOGA RD<br>GROVELAND, FL 34736 | ☒ Delete | Rebecca Dobbs VPD<br>827 Painted Horse Lane<br>Groveland, FL 34736 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>STAPLES, BEVERLY<br>984 SLOANS RIDGE RD.<br>GROVELAND, FL 34736 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>MASSEY, BEVERLY<br>2603 STEPHENS RD.<br>GROVELAND, FL 34736 | ☒ Delete | Deanna Debo-Ramirez SD<br>17845 Tuscanooga Road<br>Groveland, FL 34736 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>KRUSE, JOHN<br>16901 TUSCANOOGA ROAD<br>GROVELAND, FL 34736 | ☒ Delete | Beverly Massey PD<br>2603 Stephens Road<br>Groveland, FL 34736 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

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:** Beverly Massey — 2/22/07 — 352-429-2533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #