2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007458

Entity Name: MCKEEL ELEMENTARY ACADEMY PTO, INC.

FILED Mar 20, 2006 Secretary of State

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

411 N. FLORIDA AVE. LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

411 N. FLORIDA AVE LAKELAND, FL 33801

FEI Number: 20-0202172 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:

MORRIS, JUDI 411 N. FLORIDA AVE. US LAKELAND, FL 33801

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BLACK, SHERRY LAKEMAN, MICHELLE Name: Name:

5017 LOG CABIN DRIVE Address: 3210 BELLFLOWER WAY Address: City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33811 US

Title: () Delete Title: (X) Change () Addition

Name: LAKEMAN, MICHELLE Name: PATTY, CHENOT

Address: 3210 BELLFLOWER WAY Address: 1451 ROYAL FOREST PLACE City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33811 US

Title: () Delete Title: () Change () Addition

THOMPSON, JUDITH Name: Name: 2403 SUMMITVIEW DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33813 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: WILSON, STEPHANIE Name: STARGEL, KELLI M

2626 COLLINS AVENUE Address: 904 FLAG CT. Address: City-St-Zip: LAKELAND, FL 33823 City-St-Zip: LAKELAND, FL 33803 US

Title: () Delete Title: (X) Change () Addition

OESTREICH, PAGE ASST GALLON, NATALIE ASST Name: Name: 4514 WARING ROAD 5225 OLD ROAD 37 Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33811 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: KELLI M. STARGEL Т 03/20/2006