2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007458

FILED Apr 26, 2007 Secretary of State

Entity Name: MCKEEL ELEMENTARY ACADEMY PTO, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
411 N. FLO LAKELAND						
Current Mailing Address:			New Maili	New Mailing Address:		
411 N. FLO LAKELAND						
FEI Number:	20-0202172	FEI Number Applied For () FEI N	lumber Not Appl	icable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:		
MORRIS, JUDI 411 N. FLORIDA AVE. LAKELAND, FL 33801 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:						
		nic Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (LAKEMAN, MIO 3210 BELLFLO LAKELAND, FI	OWER WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PATTY, CHEN	FOREST PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S (THOMPSON, 2 2403 SUMMIT LAKELAND, FI	VIEW DRIVE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition YARBROUGH, JACKIE 532 PALENCIA PLACE LAKELAND, FL 33803 US		
Title: Name: Address: City-St-Zip:	T (STARGEL, KE 2626 COLLINS LAKELAND, FI	S AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () GALLON, NAT. 5225 OLD RO. LAKELAND, FI	AD 37	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify 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 STARGEL T 04/26/2007