

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2008 8:00 am
Secretary of State

08-18-2008 90002 036 ****61.25

DOCUMENT # N07000008445					
1. Entity Name R. DAN NOLAN MIDDLE SCHOOL P.T.O., INC.					
Principal Place of Business 6615 GREENBROOK BLVD. BRADENTON, FL 34211			Mailing Address 6615 GREENBROOK BLVD. BRADENTON, FL 34211		
2. Principal Place of Business - No P.O. Box # 6615 GREENBROOK BLVD		3. Mailing Address 6615 GREENBROOK BLVD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State BRADENTON, FL		City & State BRADENTON FL		4. FEI Number 26-1234925	
Zip 34202		Country U.S.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SNYDER, RYAN L ESQ. 8784 SR 70 EAST SUITE 102 BRADENTON, FL 34202			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 P NAME STASIOWSKI, KATHY STREET ADDRESS 12016 WHISTLING WAY CITY-ST-ZIP BRADENTON, FL 34202	<input type="checkbox"/> Delete		TITLE P NAME Kim Williams STREET ADDRESS 13215 SWALLOWTAIL DR. CITY-ST-ZIP BRADENTON, FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VP NAME HOUSTON, MARILYN STREET ADDRESS 11908 GOLDENASTER PLACE CITY-ST-ZIP BRADENTON, FL 34202	<input type="checkbox"/> Delete		TITLE V.P. NAME MONICA VERINDER STREET ADDRESS 6710 OUIBACK LANE CITY-ST-ZIP BRADENTON, FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T NAME WILLIAMS, KIM STREET ADDRESS 13215 SWALLOWTAIL DRIVE CITY-ST-ZIP BRADENTON, FL 34202	<input type="checkbox"/> Delete		TITLE T NAME CHERYL GERARDI STREET ADDRESS 6245 FOXGLOVE LN CITY-ST-ZIP BRADENTON FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME SWANSON, NANCY STREET ADDRESS 6615 GREENBROOK BLVD. CITY-ST-ZIP BRADENTON, FL 34211	<input type="checkbox"/> Delete		TITLE S NAME ROBIN DECECCO STREET ADDRESS 9419 ROYAL CALCUTTA PL CITY-ST-ZIP BRADENTON FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete		TITLE ADMIN ADVISOR NAME NANCY SWANSON STREET ADDRESS 6615 GREENBROOK BLVD CITY-ST-ZIP BRADENTON FL 34202	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Kim Williams</u> <u>Kim Williams</u> <u>8/10/08</u> <u>941-773-7967</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					