FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N9500004759 (5)

MCKEEL ACADEMY PARENT TEACHERS ORGANIZATION, INC

Principal Place of Business Mailing Address				i indiitat tia inin eikk sain noin a		
1810 WEST PARKER STREET LAKELAND FL 33801		1810 WEST PARKER STREET LAKELAND FL 33801				
				3. Date Incorporated or Qualified 10/02/1995	3a. Date of Last Report	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-3339327	Not Applicable	
Suite, Apt. #, etc.		Suite. Apt. #, etc		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28 Ζφ	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30	This corporation has liability for in Florida Statutes	Yes No	
	9. Name and Address of Current		1301	10. Name and Address of New Ro		
		7	81 Name			
MCFARLANE, PETER A ESQ. 5015 SOUTH FLORIDA AVE., SUITE 215				Liters (P.O. Box Number is Not Acceptable		
				Willight (F.O. Box Nulliper is Not Acceptable)		
LAKELAND FL 33813			83	83		
DAILDA	1D 1 E 300 13					
			84 City		FL 85 Zip Code	
11. Pursuant t	to the provisions of Sections 617.0502	and 617,1508, Florida Statut	es, the above-named corp	poration submits this statement for the purp	asse of changing its registered office	
or register	ed agent, or both, in the State of Florid th, and accept the obligations of, Section	la. Such change was authoriz	red by the corporation's b	pard of directors. I flereby accept the appo	intment as registered agent. I am	
SIGNATURE	Signature, tyried or printed name of registered agent a	an intro-infrançois able (NK	TE Filipstone (Agina) signature zera	real who area statistic	DATE	
12.	OFFICERS AND		13.	ADDITIONS CHANGES TO OFF	DERS AND DIRECTORS IN 12	
T:TLE	PD	DELETE	1 1 TIILE		Change Addition	
NAME	WHITEHEAD, MICHELLE		1.2 NAME			
STREET ADDRESS	5632 DAVIS ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33809		1.4 CITY - ST - ZIF	80000135	Califfrontia:	
TITLE	PD	DELETE	2 1 TITLE	60000177 	Ghange	
NAME	Mathers, Debbie		2.2 NAME	***81.25	23 023	
STREET ADDRESS	3423 GREENVIEW DRIVE		2.3 STREET ADDRESS	WWWQI LCG		
CITY-ST-ZIP	LAKELAND FL 33803		2 4 C(TY - ST - Z(P			
TITLE	SD	DELETE TE	3 1 TITLE		Change Addition	
NAME	HOLMES, KENNA		3.2 NAME		i	
STREET ADDRESS	3123 BUCKINGHAM AVE.		3.3 STREET ADDRESS			
CITY - ST - ZIP	LAKELAND FL 33803	**************************************	3.4 C(TY -ST - Z)P		Change D Addition	
TITLE	TD	₹ ZYJELETE	4 1 TITLE	Joyce Collins	I Change ☐ Addition	
NAME	ADDIS, PAT	11	4 2 NAME	Treasurer		
STREET ADDRESS	255 GLENRIDGE LOOP SOUTI	Ħ	4.3 STREET ADDRESS	4414 Selkirk Ln		
CHY-ST-ZIP	LAKELAND FL 33809	DELETE	4.4 CITY - ST - ZIP	Lakeland, FL 33813	Charige Addition	
TITLE	D MADEADY HADOLD	Morrere	5 1 TITLE		Containe Contained	
NAME CIRCLI ADDRESS	MAREADY, HAROLD 1810 WEST PARKER STREET		5.2 NAME 5.3 STREET ADDRESS			
STREET ADDRESS	LAKELAND FL 33801		1			
CITY-ST-ZIP TITLE	DANEDAND FE 33001	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME		Photocia	62 NAME		[
			6.3 STREET ADDRESS			
STREET ADDRESS					:	
City-St-ZiP 14. I do hereb	L by certify that the information supplied v	vith this filing is voluntarly fun	64 CITY-ST-ZIP nished and does not qualif	y for the exemption stated in Section 119.6	07(3)(k), Florida Statutes. I further	

or hereby betting that the information indicated on this annual report or supplemental annual report is true and accurate anothat 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lenna PHOLMES Kenna PHOlmes, SeekeTARY 3/8/96 941-498-2818
SCHOOL STATES AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SCHOOL STATES STATES SIGNING OFFICER OR DIRECTOR

32E037 (12/95)

I INBUREN: BIO IBIOI BIBLI BANK TOKK ABINI BONI BAKK DIBER IBIOI BINIO IBIN IBINI