#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007038

Entity Name: TIMBERLIN CREEK ELEMENTARY SCHOOL PARENT TEACHER

ORGANIZATION, INCORPORATED

**FILED** Jan 29, 2020 **Secretary of State** 0642400479CC

### **Current Principal Place of Business:**

555 PINE TREE LANE ST. AUGUSTINE, FL 32092

## **Current Mailing Address:**

555 PINE TREE LANE ST. AUGUSTINE, FL 32092

FEI Number: 57-1220786 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

TORRES, EMILY JANE ELIZABETH 555 PINE TREE LANE ST. AUGUSTINE, FL 32092 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: EMILY TORRES 01/29/2020

> Electronic Signature of Registered Agent Date

# Officer/Director Detail:

City-State-Zip:

Title **PRESIDENT** Title CO-PRESIDENT Name EVANS, DAWN Name PRICE, BETH

Address 555 PINE TREE LANE Address 555 PINE TREE LANE City-State-Zip: ST AUGUSTINE FL 32092 City-State-Zip: ST AUGUSTINE FL 32092

Title **SECRETARY** Title **TREASURER** Name TORRES, EMILY JANE ELIZABETH Name CELETTI, HETHER Address 555 PINE TREE LANE Address 555 PINE TREE LANE City-State-Zip: ST AUGUSTINE FL 32092

Title **PARLIAMENTARIAN** Name HUX, ELIZABETH 555 PINE TREE LANE Address ST AUGUSTINE FL 32092 City-State-Zip:

ST AUGUSTINE FL 32092

I hereby 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 all other like empowered.

SIGNATURE: EMILY JANE ELIZABETH TORRES

**TREASURER** 

01/29/2020