

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1997

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

DOCUMENT # 723492 (5)

1. Corporation Name

PARENTS AND TEACHERS OF MILDRED HELMS ELEMENTARY SCHOOL, INC.

Principal Place of Business
ENTARY SCHOOL, INC.
561 CLEARWATER LARGO RD.
LARGO FL 34640

Mailing Address
ENTARY SCHOOL, INC.
561 CLEARWATER LARGO RD.
LARGO FL 34640

97 OCT -9 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/24/1972	3a. Date of Last Report 05/01/1996
4. FEI Number 23-7628153	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	29
25	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SPENCER, JOYCE
561 SOUTH CLEARWATER/LARGO RD.
LARGO FL 34640

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Joyce Spencer* (NOTE: Registered Agent signature required when reinstating) DATE **6-15-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	LEONE, PAKITA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1549 10TH ST. S.W.	1.3 STREET ADDRESS	315 10th Ave
CITY-ST-ZIP	LARGO FL	1.4 CITY-ST-ZIP	Indian Rocks Bch, FL 33785
TITLE	NAME	2.1 TITLE	2.2 NAME
VD	FORREST, SHERRI	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1122 20TH ST S.W.	2.3 STREET ADDRESS	1117 19th St. S.W.
CITY-ST-ZIP	LARGO FL	2.4 CITY-ST-ZIP	Largo, FL 33770
TITLE	NAME	3.1 TITLE	3.2 NAME
T	ADAMS, KAREN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2096 HICKORY DR.	3.3 STREET ADDRESS	Shaughn Gulliver
CITY-ST-ZIP	LARGO FL	3.4 CITY-ST-ZIP	300 Crescent Dr.
TITLE	NAME	4.1 TITLE	4.2 NAME
S	SUE DELEANIDES	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1350 PARKVIEW LAN	4.3 STREET ADDRESS	Barb Tilley
CITY-ST-ZIP	LARGO FL	4.4 CITY-ST-ZIP	300 7th Ave S.W.
TITLE	NAME	5.1 TITLE	5.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	6.2 NAME
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (4/97)