

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90349 040 \*\*\*\*61.25

<b>DOCUMENT # 748849</b> 1. Entity Name <span style="float: right;"><i>PTA</i></span> <b>SEMINOLE MIDDLE SCHOOL PTO, INC.</b>					
Principal Place of Business <b>8701 131 STREET NORTH SEMINOLE, FL 33776</b>			Mailing Address <b>8701 131 STREET NORTH SEMINOLE, FL 33776</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>23-7409812</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>LEBOEUF, JUDY 8701 131ST STREET N SEMINOLE, FL 33776</b>				Name <i>Carol Conway</i> Street Address (P.O. Box Number is Not Acceptable) <i>9778-106th Avenue North</i> City <i>Largo</i> <b>FL</b> Zip Code <i>33773</i>	
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 <i>Carol Conway</i> <span style="float: right;"><i>4/11/06</i></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>CLEMENTS, JODIE 14351-84TH TERR N SEMINOLE, FL 33776</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD <b>PAPANDREW, JACKIE 14422 BAY HILLS DR LARGO, FL 33774</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD <b>DOWEN, TOM 12760 RIDGE RD LARGO, FL 33778</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3PD <b>SAWA-SZOSTAK, DEBBIE 13885 MEARES DR LARGO, FL 33774</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>BALES, ELAINE 11700-85TH AVE N SEMINOLE, FL 33772</b>	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <b>HARRIOTT, DEBI 8212-131ST WAY N SEMINOLE, FL 33776</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>JACKIE PAPANDREW 14422 Bay Hills Drive LARGO FL 33774</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD <b>MYRA BENZ 8235 127th Ave N SEMINOLE FL 33776</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD <b>Yvette Meyer 12971 Farmington Trail SEMINOLE FL 33776</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>GINA RACK 13331 92nd Ave. N SEMINOLE FL 33776</b>	<input checked="" 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 <i>Jackie Papandrew</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <i>4-18-06</i> Daytime Phone # <i>7275937193</i>	