

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003856

FILED
Apr 28, 2009
Secretary of State

Entity Name: AVALON MIDDLE SCHOOL PTO, INC.

Current Principal Place of Business:

5445 KING ARTHUR'S WAY
MILTON, FL 32583

New Principal Place of Business:

Current Mailing Address:

5445 KING ARTHUR'S WAY
MILTON, FL 32583

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, GEORGE D
4519 HIGHWAY 90
PACE, FL 32571 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TURNER, SHARON
Address: 5150 TUSCALOOSA ST
City-St-Zip: MILTON, FL 32583

Title: SD () Delete
Name: BRELAND, KELLEY
Address: 4760 LORI LANE
City-St-Zip: PACE, FL 32571

Title: VD () Delete
Name: MURTA, ROBIN
Address: 6608 TIDAL VAY DR
City-St-Zip: MILTON, FL 32583

Title: TD () Delete
Name: PHILLIPS, MICHELLE
Address: 6212 MARY KITCHENS RD
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NORRIS, FELESHIA
Address: 5486 HOLLOW OAK LN
City-St-Zip: PACE, FL 32571

Title: SD (X) Change () Addition
Name: MOORE, CAROLYN
Address: 5321 WILLOW OAK DR
City-St-Zip: PACE, FL 32571

Title: VD (X) Change () Addition
Name: NORRIS, RICK
Address: 5486 HOLLOW OAK LN
City-St-Zip: PACE, FL 32571

Title: TD (X) Change () Addition
Name: MURTA, ROBIN
Address: 6608 TIDAL BAY DR
City-St-Zip: MILTON, FL 32583

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBIN MURTA

TD

04/28/2009

Electronic Signature of Signing Officer or Director

Date