

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008 8:00 am
Secretary of State

02-29-2008 90018 031 ****61.50

DOCUMENT # N01000006168 1. Entity Name MANATEE SCHOOL FOR THE ARTS PTO, INC.					
Principal Place of Business 700 HABEN BLVD PALMETTO, FL 34221			Mailing Address 700 HABEN BLVD PALMETTO, FL 34221		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. Fed Number 02-0544223	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent CURPHEY, WILLIAM E 2605 ENTERPRISE ROAD EAST CLEARWATER, FL 33759				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D KUIKEN, LETICIA 700 HABEN BLVD PALMETTO, FL 34221	☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Terry Davis 700 Haben Blvd Palmetto, FL 34221
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D JONES, BILL, DR. 700 HABEN BLVD. PALMETTO, FL 34221	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BROWN, VAN 700 HABEN BLVD. PALMETTO, FL 34221	☒ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Garnet McDonald 700 Haben Blvd PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Angelstar Colon 700 Haben Blvd Palmetto, FL 34221
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ 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 another life empowered.					
SIGNATURE:			2/13/08 (941) 721-6800		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		