

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007124

FILED
Aug 11, 2009
Secretary of State

Entity Name: WEST DEFUNIAK ELEMENTARY PARENT-TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

815 LINCOLN AVE.
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

815 LINCOLN AVE.
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

FEI Number: 59-3736665 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HINOTE, RONITA
1000 MCLENDON ROAD
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

PAUL, DARLENE
2539 HARDY SKIPPER ROAD
PONCE DE LEON, FL 32455 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: DARLENE PAUL

08/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRANNON, JENNY
Address: 90 PLATT ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: P () Delete
Name: BETTS, STACY
Address: 12725 2ND AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T () Delete
Name: FEITSMA, RHONDA
Address: 91 HIDDEN LAKES TRAIL
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: S () Delete
Name: COWIE, TERESA
Address: 287 LIVE OAK AVENUE, E
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARTON, J.J.
Address: 536 LAKESIDE DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: P (X) Change () Addition
Name: MCLANEY, CHASTITY
Address: 648 INGLE ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T (X) Change () Addition
Name: ADAMS, AMANDA
Address: 131 WINDHAM WAY
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: S (X) Change () Addition
Name: CARRY, TRUETT
Address: 23 MARY'S COURT
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: J.J. BARTON

P

08/11/2009

Electronic Signature of Signing Officer or Director

Date