2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State
01-15-2003 90204 010 ****61.25

DOCUMENT # N02000003594

1. Entity Name
ASTORIA PARK ELEM. SCHOOL PTO, INC.

Principal Place of Business
2465 ATLAS RD.
TALLAHASSEE FL 32303

Mailing Address
2465 ATLAS RD.
TALLAHASSEE FL 32303

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 01-0661443 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WHITTINGTON, JACKIE
2465 ATLAS RD.
TALLAHASSEE FL 32303

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) DATE

FILE NOW: FEE IS $61.25

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

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WHITTINGTON, JACK 2107 CROYDON DR. TALLAHASSEE FL 32308	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WHITTINGTON, JACKIE 2107 CROYDON DR. TALLAHASSEE FL 32308	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PIRTLE, CRYSTAL 2264 NANNAS LOOP TALLAHASSEE FL 32308	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V OLSON, KELLY 2330 FANTA ST. TALLAHASSEE FL 32308	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ANDRIC, MELISSA 3123 JOREE LANE TALLAHASSEE FL 32309	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BONNER, CONNIE 2306 CUMBERLAND DR. TALLAHASSEE FL 32308	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Hufe, Loretta 1942 ROB WAY TALLAHASSEE, FL 32303	☐ Change ☒ Addition

CR2E037 (10/02)

12. I 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 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: Jacqueline Whittington (Jacqueline Whittington) 1-14-03 385-7643
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #