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

DOCUMENT # N02000005749

1. Entity Name

PRINE ELEMENTARY PTO, INC.



FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90154 002 ****61.25

Principal Plac 3801 SOUTHER BRADENTON F	n PKWY	3801 SOUTHE	Mailing Address 3801 SOUTHERN PKWY BRADENTON FL 34205				<u>\$8](8 </u> 1811 88))) 88(il 8)		.	110 10 11 1 30 1
2. Principal P	lace of Business	3. Mailing Ac	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State	9	City & Sta	City & State			4. FEI Number 42-15-449-79 Applied For Not Applied For				
Zip	Country	Zìp		Country		5. Certificate of			8.75 Add	
	_6. Name and Address	of Current Registered Age	nt			7. Name and Ad	dress of New Re			<u> </u>
FOUSE, LINDA 3801 SOUTHERN PKWY BRADENTON FL 34205					Address (P	O. Box Number is	Not Acceptable)			
et et			City			***			Zip Code	
A. The above	i.: 8. The above named entity submits this statement for the purpose of changing its regist							FL	,	
FILE NOW: FEE IS \$61.25			Election Campaigr Trust Fund Contrib	n Financing		\$5.00 May Be Added to Fees		e Check l Departm		
10.	OFFICE	RS AND DIRECTORS	1	1.	, Al	DDITIONS/CHAN	GES TO OFFICERS	S AND DIRE	CTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP			N S	ITLE IAME ITREET ADDRESS ITY-ST-ZIP	P/D 5011	HUCKE 1-33MSt. DENTON, FE	Ct.W		☐ Change	∠ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			N.	ITLE IAME TREET ADDRESS ITY-ST-ZIP	VP10 CECH 2706	L MORRIS -395 StW DENTON, FO		[_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			N ₂	ITLE	MAG 3315	GIE GU -35 - AVI	THRIE		- Change -	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			N/	ITLE Ame Treet address ITY-ST-ZIP	<td>MORRIS -39 PS ENTON, FL</td> <td></td> <td></td> <td>☐ Change</td> <td>Addition</td>	MORRIS -39 PS ENTON, FL			☐ Change	Addition
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2. 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:

CONTICK PECUIRED

2/3/2003

941-746-1167